

Handbook for Electronic Filers of Individual Income Tax Returns

Tax Year 2000

STC-ELF-02 09/2000

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#### WHATS NEW FOR 2000?

Idaho implemented Form 55 (Credit for Qualifying New Employees) this year; this form can be part of the electronic record.

Income tax rates changed.

#### **LEGISLATIVE CHANGES**

### **Married Taxpayers Filing Jointly**

Effective January 1, 2000, the standard deduction for married taxpayers filing jointly is two times the basic standard deduction.

### **Credit for Qualifying New Employees**

Effective January 1, 2000, a qualifying new employee is a person from whom Idaho income tax has been withheld, who is employed by the taxpayer in a revenue-producing enterprise that creates value-added natural resource products, and who is covered for unemployment insurance purposes under the Idaho Code. For purposes of this credit, a revenue-producing enterprise means a business that produces, assembles, fabricates, manufactures, or processes a natural resource product.

### **College Savings Program**

As of January 1, 2000, you may contribute up to \$4,000 (\$8,000 if married) per year to a college savings program and deduct the contribution.

# **Individual Income Tax Rates Decreased and Tax Brackets Adjusted**

Individual income tax rates are reduced one-tenth of one percent for tax year 2000.

### **Health Insurance for a Self-Employed Taxpayer**

A self-employed taxpayer may, on his Idaho return, deduct costs paid after January 1, 2000, for medical insurance for himself, his spouse, and dependents if he cannot deduct the costs on his federal return due to the percentage limitations on the federal deduction.

### **Expanded Investment Tax Credit**

For tax years beginning on and after January 1, 2000, the investment tax credit has been expanded. You can now use the credit to offset up to 50% of your tax liability. In addition, the credit carryover has been increased to 14 years. This increase in the carryover period applies both to credit earned in tax years beginning on and after January 1, 2000 and to any credit carryover that is available to be carried over into tax years beginning on or after January 1, 2000. The extended carryover period does not apply to credit that expired in its seventh year prior to tax years beginning on or after January 1, 2000.

# **Changes to Net Operating Loss Carryback and Carryforward Periods**

For tax years beginning on or after January 1, 2000, the net operating loss carryback period is two years and the carryforward period is 20 years. You may still elect to forego the carryback period and simply carry the loss forward. Losses carriedback continue to be limited to \$100,000 per loss year.

#### FORM CHANGES

College Savings Program was added to Form 40, line 27 and Form 43, line 42.

Credit for Qualifying New Employees was added to Form 40, line 48 and Form 43, line 64.

Self-employment Health Insurance subtraction was added to Form 39, Page 1, Section C, line 4.

Retirement Benefits Deduction for part-year residents was added to Form 39, Page 2, Section A, Page 12.

# CONTACT NAMES, TELEPHONE NUMBERS E-MAIL ADDRESSES

TAXPAYERS, PREPARERS, TRANSMITTERS, and EROs Robin Allen, Help Desk	. 208)	334-7783
PREPARERS, TRANSMITTERS, and EROs Diane Tietz, Electronic Filing Coordinator Dtietz@tax.state.id.us	(208)	334-7822
SOFTWARE DEVELOPERS Steve Thimsen, Technical Support Sthimsen@tax.state.id.us	(208)	334-7569
REFUND INFORMATION 24-HR Toll Free	(208)	228-5770
TAX FORMS ORDER BY FAX 24-HR Toll Free	(208)	228-5770
TAX INFORMATION & FORMS Toll Free	(208)	972-7660
HEARING IMPAIRED CALLERS (TDD) Toll Free	(800)	377-3529
FAX	(208)	334-7650

INTERNET: HTTP://WWW2.STATE.ID.US/TAX

FORMS ARE AVAILABLE AT MOST IDAHO LIBRARIES. A COPY OF "IDAHO REPRODUCIBLE FORMS" CONTAINS IDAHO TAX FORMS FOR INDIVIDUALS AND BUSINESS.

# IDAHO ELECTRONIC FILING CALENDAR FOR TAX YEAR 2000

Begin Federal/State Acceptance Testing1	1/13/00
State testing for software developers to begin after developers have been accepted by the Internal Revenue Service.	
Begin Transmitting Returns to IRS/IDAHO0	1/12/01
Last date for timely filed returns0	4/16/01
Last date for Extended Filing of State Returns1	0/15/01

**NOTE:** These dates may be subject to change at any time.

#### INTRODUCTION

Idaho participates in Federal/State Electronic Filing (E-File) with the Internal Revenue Service (IRS). Federal/State E-File provides one-step electronic filing of both federal and state income tax returns in a single transmission.

The Idaho State Tax Commission will accept electronically transmitted Individual Income Tax refund, zero balance, and tax due returns. Also offered is direct deposit in the Federal/State Filing Program with the Internal Revenue Service.

The following publications describe the process of electronic filing and federal/state electronic filing:

#### **PUBLICATIONS**

#### **Idaho State Tax Commission**

- ❖ Idaho State Handbook for Electronic Filers of Individual Income Tax Returns. (STC-ELF-01)
- ❖ Idaho Electronic Filing System. Information for Software Developers. (STC-ELF-02)
- ❖ Idaho Electronic Filing Test Package. (STC-ELF-03)

#### **Internal Revenue Service**

- ❖ Publication 1345, Handbook for Electronic Filers of Individual Income Tax Returns.
- ❖ Publication 1346, Electronic Return File Specifications and Record Layouts for Individual Income Tax Returns.
- ❖ Publication 1436, Test Package for Electronic Filing of Individual Income Tax Returns.

#### **APPLICATIONS PROCESS**

To participate in the Federal/State Electronic Filing Program, apply to the IRS by submitting Form 8633. Upon acceptance, complete the Idaho "Application to Participate in the Electronic Filing Program." Submit this with a copy of your acceptance letter from the IRS. An application to participate in Idaho is available in the appendix.

If you are already registered with the Idaho State Tax Commission and you have had no change, you need not reapply.

IRS publication 1345 defines the application process and requirements for federal participation. The IRS definitions of various electronic filer categories (Electronic Return Originator, Transmitters, Software Developer, etc.) also apply for Idaho electronic filing.

### FEDERAL/STATE ELECTRONIC FILING PROCESS HOW FEDERAL/STATE FILING WORKS

Tax preparers and transmitters accepted in the IRS electronic filing program will be able to participate in the Federal/State program and file both the federal and the state return in one transmission, to the IRS Austin Service Center (with appropriate software).

The Idaho State Tax Commission will acknowledge to the transmitter receipt of all returns retrieved from the Internal Revenue Service. The transmitter should be able to retrieve the Idaho Acknowledgment within two (2) days from the time he receives his acknowledgment from the Internal Revenue Service.

The taxpayer can expect to have his refund check mailed or deposited within two (2) weeks from the date of acknowledgment from the Idaho State Tax Commission.

This timing depends on the following:

- The return contains no errors
- The taxpayer owes no debts that may be offset to other state or federal agencies
- Correct bank numbers and account numbers, if requesting direct deposit

#### **ACCEPTANCE PROCESS**

#### **EFIN and ETIN**

The Internal Revenue Service assigns the EFIN (Electronic Filing Identification Number) and ETIN (Electronic Transmitter Identification Number). The Idaho State Tax Commission will use these same numbers in the Federal/State Electronic Filing Program.

These numbers will be used in the Acknowledgment System to identify preparers and transmitters.

#### **IDAHO TEST DATA**

All participants are required to follow the Internal Revenue Service testing procedures for acceptance into the program.

**Only Software Developers** are required to test their software with Idaho. Participants must transmit live return data using only Idaho accepted Federal/State Electronic Filing Software.

When a software developer has successfully completed the Internal Revenue Service **PATS** testing, he may begin Idaho testing. The state data will be retrieved from the Internal Revenue Service and processed by the Idaho State Tax Commission. All known software developers in the program will be provided with test material and instructions to perform the Idaho testing.

## IDAHO PORTION OF THE ELECTRONIC RETURN

The Idaho portion of an electronic return will consist of data transmitted electronically and supporting paper documents.

## **ELECTRONINC IDAHO RETURNS**

The following forms and schedules may be transmitted electronically (electronic return):

FORM 40Idaho Long Form (Form 40EZ filers can also use this format)
FORM 43Part Year/Nonresident
FORM CGCapital Gain
FORM 49
FORM 49CIdaho Investment Tax Credit Carryover
FORM 49R Recapture of Idaho Investment Tax Credit
FORM 55Credit for Qualifying New Employees
FORM 56 Idaho Individual Net Operating Loss Computation
FORM 75
FORM 75IMVIdaho Fuels Tax Refund Worksheet Intrastate Motor Vehicles
FORM W-2 and 1099RWithholding and Distributions
FORM 39 Idaho Supplemental Schedule

Supporting Federal Returns and Schedules **are Required for all** Electronic Returns.

#### **EXCLUSIONS FROM ELECTRONIC FILING**

In addition to the returns listed in **Publication 1345** as excluded from federal electronic filing for the 2000 tax filing period, the following documents will **not be acceptable** for electronic filing on the 2000 Idaho return:

FORM 40X ...... Amended Individual Income Tax Return.

PRIOR YEAR RETURNS...... Any return not for 2000.

NON-CALENDAR YEAR FILERS

RETURNS CLAIMING CREDIT FOR TAXES PAID TO OTHER STATES

MARRIED FILING SEPARATE RETURNS

#### TRANSMITTING THE IDAHO ELECTRONIC RETURN

Since the Idaho electronic return will be transmitted with the federal return, the transmitter must follow all electronic transmitting procedures, communication requirements, and technical specifications required by the Internal Revenue Service, as defined in *Publication 1345*.

#### WHERE TO TRANSMIT FEDERAL/STATE RETURNS

Returns must be transmitted only to Austin Service Center. A transmitter who resides outside the area supported by the Austin Service Center (for instance, in Oregon or California) must establish an Idaho location in order to transmit Idaho returns in the Federal/State program.

Participants in the Federal/State Electronic Filing Program must confirm with their software developer or direct transmitter that the software has the capability of processing and transmitting the state data along with the federal data to the Austin Service Center.

#### REJECT CODES RECEIVED FROM THE AUSTIN SERVICE CENTER

The Internal Revenue Service will identify certain conditions on the state return data that will cause rejects when the return data is received and will indicate those returns with a code on the acknowledgment record.

If a federal return is rejected due to errors, the accompanying state return will also be rejected. If a state tax return is rejected due to errors, the federal return will also be rejected. **Publication 1345** will provide a list of all Reject Codes, including those applicable to the state return. **Form 8453**, **U.S. Individual Income Tax Declaration for Electronic Filing**, informs taxpayers their return may be rejected due to errors on their records and, consequently, their federal return records may be retransmitted to the Internal Revenue Service. If a state return cannot be corrected, the filer has the option of retransmitting the federal return data and filing the state return by mail. A state return cannot be filed electronically without the federal return also being filed electronically.

#### **IDAHO ACKNOWLEDGMENT**

#### PURPOSE OF IDAHO ACKNOWLEDGMENT SYSTEM

The Idaho Acknowledgment system informs the transmitter that Idaho has retrieved the state return from the IRS and is processing it. It does not indicate if there are any errors.

Idaho will not reject any return received. All inaccurate and incomplete returns will be corrected through normal error resolution procedures. The agency will contact the taxpayer if more information is needed to correct errors. Preparers who have been given authorization by the taxpayer may discuss their return with the Idaho State Tax Commission.

The Idaho acknowledgment is separate from the IRS acknowledgment. Receiving the IRS acknowledgment does not mean the state return was received by the Idaho State Tax Commission.

# TRANSMITTER SIGN UP FOR THE IDAHO ACKNOWLEDGMENT SYSTEM

You can call the Centralized State Acknowledgment System (StAck) Help Desk at **828-349-5750** to request an application (or you can use the enclosed Centralized State Acknowledgment System (StAck) Transmitter Profile Form). Then mail or fax it to:

FAX # 828-349-5745

DRAKE ENTERPRISES, LTD ATTN: StAck 235 E PALMER ST FRANKLIN NC 28734-3089

You may also register through the Internet. WWW.STATE-ACK.NET

#### PROCESSING AND RETAINING THE IDAHO 8453

After the Idaho 8453 has been completed and signed by the taxpayer and the ERO, a copy of the prepared return and the Idaho 8453 must be provided to the taxpayer. It must be clearly communicated to the taxpayer that it is the taxpayer's responsibility to retain all documentation related to the tax filing for a period of three (3) years from the end of the calendar year in which the return was due or filed. In addition, the preparer must retain a completed signed copy of the Idaho 8453 along with all supporting schedules and documentation in his business files.

By transmitting the electronic portion of the return, the electronic filer is agreeing that all appropriate parties must sign the Idaho 8453 or attachments to the Idaho 8453 before the return is transmitted. Missing, incomplete, and/or erroneous Forms Idaho 8453 could lead to suspension from the electronic filing program.

A *copy of* the Idaho 8453 is *included* in the appendix of this handbook. Complete all sections of the *ID 8453*.

## RESPONSIBILITIES OF ELECTRONIC FILERS, TRANSMITTERS, EROS

Electronic Filers, Transmitters, and Electronic Return Originators must abide by the terms set forth in the *Idaho State Handbook* and must maintain a high degree of integrity, compliance, and accuracy in order to continue to participate in the Federal/State Electronic Filing Program, as well as abide by the following requirements:

#### **COMPLIANCE**

All electronic filers must comply with the requirements and specifications set forth in the Internal Revenue Service *Publications 1345 and 1346*, the *Idaho State Handbook* and the *Idaho Software Specifications*.

#### TIMELINESS OF FILING

Transmitters must ensure that electronic returns are filed in a timely manner. The date of the Internal Revenue Service acknowledgment will be considered the filing date for an Idaho return transmitted electronically.

Further, transmitters should confirm acknowledgment of the state return by the Idaho State Tax Commission before considering the state portion received.

#### **DEADLINE FOR FILING**

The Idaho State Tax Commission will accept electronically filed Idaho returns which have been submitted for transmission to the Internal Revenue Service Austin Service Center through October 15, 2001. Any Idaho returns submitted after October 15, 2001 must be filed as paper documents.

#### RESPONSIBILITY TO YOUR CLIENTS

Preparers have been entrusted with the task of filing a client's tax return and **must** assume the responsibility of ensuring that the return arrives at the Idaho State Tax Commission. In the event that the Electronic State return fails to arrive at its destination, preparers **must** notify their clients to file a paper return.

#### **CHANGES ON THE RETURN**

If the transmitter or taxpayer wishes to make any changes after the return has been accepted and acknowledged, the taxpayer must file an *Amended Return* through the paper document filing process. Idaho returns must be mailed to the following address:

IDAHO STATE TAX COMMISSION PO BOX 56 BOISE ID 83756-0056

#### HANDLING PROBLEMS

For assistance with problems relating to the electronically filed state return:

TAXPAYERS, PREPARERS, TRANSMITTERS and EROs *ONLY* may call (208) 334-7783.

#### CHECKING THE IDAHO ACKNOWLEDGMENT FILE

Once an electronic return has been acknowledged by the Idaho State Tax Commission, transmitters are required to notify their EROs of acceptance, within five (5) working days after receipt of acknowledgment from the Idaho State Tax Commission.

An Idaho acknowledgment indicates that the return has been received and will be processed. The taxpayer is to be advised to wait at least two (2) weeks from the date of acknowledgment before inquiring about his tax return.

Any returns with errors will be directed to the taxpayer or his agent who has power-of-attorney on file for the tax year in question.

# **POSTAL ADDRESS STANDARDS**

# **RULES:**

Upper case letters preferred but not required.

Punctuation should be omitted except the hyphen in the zip code.

Directional information should be abbreviated.

SHOULD BE	<u>NOT</u>
234 NW SMITH ST	234 NORTHWEST SMITH STREET 234 NW SMITH STREET
678 MAIN DR S	678 MAIN DRIVE SOUTH
101 N BAY LN	101 NORTH BAY LANE
599 BAY BLVD SW SOUTHWEST	599 BAY BOULEVARD
127 N 12TH ST	127 NORTH 12TH 127 N 12TH STREET
POSTAL BOX	<u>NOT</u>
PO BOX 213	P O BOX 213 BOX 213
RURAL ROUTE ADDRESSES	<u>NOT</u>
RR 2 BOX 152 RFD and RD = RR	RT 2 BOX 152

# **COMMON ABBREVIATIONS**

APARTMENT	APT	DEPARTMENT	DEPT
BUILDING	BLDG	SUITE	STE
FLOOR	FL	ROOM	RM

# 2000 TC8453E

# IDAHO INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING ID-8453

For the year January 1 - December 31, 2000

Taxpayer's first name and initial	Last name	Taxpayer's Social Security Number
If a joint return, spouse's first name and initial	Last name	Spouse's Social Security Number
Address (number, street and apartment number)		Daytime phone number
City, State and Zip Code		
x Return Information (whole dollar	lars only)	
1. Idaho income tax withheld (Form 4	40, line 63 or Form 43, line 77)	1
2. Refund (Form 40, line 70 or Form 4	43, line 84)	2
·	·	
		•
<b>rect Deposit of Refund</b> (see instr	ructions)	
4. Name of financial institution and, if	f applicable, branch name.	
5. Routing transit number (RTN)		
	ha aldin a Carata aa	
	necking Savings	
eclaration of Taxpayer	·	
eral and Idaho returns will be jointly filed a		
red. Taxpaver's signature		Date
Taxpayer's signature		Date
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Taxpayer's signature  Spouse's signature (if a joint return, BOTH MUST SIG		Date
Taxpayer's signature  Spouse's signature (if a joint return, BOTH MUST SIG  Declaration of Electronic Return C  I have reviewed the above taxpayer's retu	Originator (ERO) and Paid Prepurn and that the entries on this form are od the taxpayer with a copy of all forms	Date
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Taxpayer's signature  Spouse's signature (if a joint return, BOTH MUST SIG  Declaration of Electronic Return C  I have reviewed the above taxpayer's returned the taxpayer's signature and provided gned copy of this form and supporting do	Originator (ERO) and Paid Prepurn and that the entries on this form are od the taxpayer with a copy of all forms	Date  arer  complete and correct to the best of my knowledge. s and schedules. I understand that I am required
Spouse's signature (if a joint return, BOTH MUST SIGnove is signature)  Declaration of Electronic Return Countries that the lambda is signature and provided the taxpayer's signature and provided in the provided in the signature and supporting documents.	Originator (ERO) and Paid Prepurn and that the entries on this form are od the taxpayer with a copy of all forms	Date  Date  Date  complete and correct to the best of my knowledge. I understand that I am required  EIN, SSN, or PTIN  Check if also paid preparer
Spouse's signature (if a joint return, BOTH MUST SIGNOSSIGNATURE)  Declaration of Electronic Return Council I have reviewed the above taxpayer's returned the taxpayer's signature and provided gned copy of this form and supporting documents are signature.  ERO's signature  Firm's name (or yours if self-employed)  Address, City, State and Zip Code  ies of perjury, I declare that I have examinated the signature.	Originator (ERO) and Paid Prepurn and that the entries on this form are of the taxpayer with a copy of all forms ocuments for three years.	Date  Date  Date  complete and correct to the best of my knowledge. I understand that I am required  EIN, SSN, or PTIN  Check if also paid preparer
Spouse's signature (if a joint return, BOTH MUST SIGNOSSIGNATURE)  Declaration of Electronic Return Comparison of Electronic R	Originator (ERO) and Paid Prepurn and that the entries on this form are of the taxpayer with a copy of all forms ocuments for three years.	Date  Date  complete and correct to the best of my knowledge. I understand that I am required  EIN, SSN, or PTIN  Check if also paid preparer  Check if self-employed  ccompanying schedules and statements, and to
Spouse's signature (if a joint return, BOTH MUST SIGNOSSIGNATURE)  Declaration of Electronic Return Council I have reviewed the above taxpayer's returned the taxpayer's signature and provided gned copy of this form and supporting documents of the signature of t	Originator (ERO) and Paid Prepurn and that the entries on this form are of the taxpayer with a copy of all forms ocuments for three years.	Date  Complete and correct to the best of my knowledge. I understand that I am required  EIN, SSN, or PTIN  Check if also paid preparer Check if self-employed  Ccompanying schedules and statements, and to preparer is based on all information of which the
Spouse's signature (if a joint return, BOTH MUST SIGNOSSIGNATURE)  Declaration of Electronic Return Comparison of the Land of	Originator (ERO) and Paid Prepurn and that the entries on this form are of the taxpayer with a copy of all forms ocuments for three years.	Date  Date  complete and correct to the best of my knowledge. I understand that I am required  EIN, SSN, or PTIN  Check if also paid preparer  Check if self-employed  ccompanying schedules and statements, and to preparer is based on all information of which the
	City, State and Zip Code  x Return Information (whole doll  1. Idaho income tax withheld (Form 4) 2. Refund (Form 40, line 70 or Form 3. Total due (Form 40, line 68 or Form Make check or money order payaborect Deposit of Refund (see inst 4. Name of financial institution and, if 5. Routing transit number (RTN) 6. Depositor account number (DAN) 7. Type of account:  ceclaration of Taxpayer  dies of perjury, I declare that I have comp have provided to my Electronic Return of Conding lines of my return. To the best of ceral and Idaho returns will be jointly filed account in the conding lines of my returns will be jointly filed account.	Address (number, street and apartment number)  City, State and Zip Code   *** Return Information* (whole dollars only)  1. Idaho income tax withheld (Form 40, line 63 or Form 43, line 77)

Do not mail this form or the paper return.

Retain this form with your tax records. You may be asked to provide the tax return and this form.

# Instructions for Idaho Form 8453

#### "Label" - Taxpayer Name and Address

If the taxpayer received a mailing label, place the label in the name area. Cross out any errors and print the correct information on the label. If there is no label, print or type the taxpayer's name, social security number and address in the area provided. If the return is for a married couple filing jointly, fill in the spouse's name and social security number. The name and address must match the information on the electronically filed return.

#### Part I. Tax Return Information

Amounts must be rounded to whole dollars. Complete lines 1 through 3. These entries must match the entries on the corresponding lines of the electronically filed return.

#### Part II. Direct Deposit of Refund

Taxpayers can have their refund directly deposited to their bank by completing Part II.

**Line 4.** Enter the name of the financial institution where the refund will be deposited.

Line 5. The financial institution routing transit number (RTN) must contain nine digits and begin with 01 through 12 or 21 through 32. If it does not, your direct deposit request will be rejected. (If the taxpayer has a regular checking account, the bank's RTN is the first nine digits in the row of numbers on the bottom of the deposit slip.)

**Line 6.** The depositor account number can contain up to 17 alphanumeric characters. Include hyphens but omit spaces and special symbols. If fewer than 17 characters, enter the number from left to right and leave the unused boxes blank.

For a regular checking account, the depositor account number begins directly after the bank's RTN on the bottom of the deposit slip. If there is any doubt about the correct RTN, the taxpayer should contact the financial institution and ask for the correct RTN for direct deposit (Electronic Funds Transfers).

#### Line 7. Check the appropriate box.

Note: Some financial institutions may not accept direct deposits into accounts that are payable through other banks or financial institutions, including credit unions.

#### Part III. Declaration of Taxpayer

After preparing the return, but before transmitting it, the taxpayer (and spouse, if a joint return) must verify the information on the tax return and sign it and Form 8453. The preparer or electronic return originator keeps the original tax return and Form 8453 and gives the taxpayer a complete copy. The taxpayer's signature is required for all returns. If the electronic return originator changes the electronic return after the taxpayer signs Form 8453 but before it is transmitted, the taxpayer must complete and sign a corrected Form 8453.

# Part IV. Declaration of Electronic Return Originator and Paid Preparer

The Idaho State Tax Commission requires the electronic return originator to sign this form and keep it with the tax return and schedules. If the electronic return originator is not the paid preparer for this tax return, the paid preparer must also sign. A copy of all forms and schedules must be kept for three years.

#### Refund Information

The taxpayer can usually expect the refund within two weeks after the Idaho State Tax Commission acknowledges receiving the return. Refund information is available by calling (208) 364-7389 or (888) 228-5770.

# 2000 TC40000-1

# IDAHO INDIVIDUAL INCOME TAX RETURN

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For the year January 1 - December 31, 2000, or fiscal year beginning, 2000, ending								2001						
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Other		Address (number, st	reet and apartment number)											
•	please print					IMPOI								
		City, State and Zip (	Code								Y	ou <b>must</b>	enter 3) above	-
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f you	and y	our tax prepar	er need Idaho income tax forms	and instruct	tion	ns n	nailed to y	ou next	year, c	heck the l	OOX.	• [	<u>]                                    </u>	
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STATUS	3	_	separate return		6			DO NOT		ent on his d ox 6a	or ner	tax retui	Π,	
ST,		Enter spouse's SSN and full name here.			PTI	b.	Number o				om fe	deral for	m	.
	4.	Head of house			∑			3						
FILING		Enter name of pers who qualifies you.	on		EXEMPTION	C.	Number o	of other d	ependen	ts from fed	leral fo	orm		•
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뿔		ЛЕ. See instruc			• ∟		• 🗀	• [		• 🗆	•		•	
COPIES HER	9. Er	nter your federal	adjusted gross income from federal	Form 1040,	line	33	3; federal Fo	orm 1040	OA, line	19;				
OPI	or	federal Form 10	rm 1040EZ, line 4. Attach a complete copy of your federal return.					9			00			
		DITIONS. See instructions, page 5.												
- 1		Federal net operating loss carryforward included in line 9						10			00			
		11. Capital loss carryforward incurred outside the state before becoming an Idaho resident						11 12			00			
\TE			<u> </u>						13			00		
STATE			ons. Add lines 9 through 13.								14			00
	SUBT	RACTIONS. Se	e instructions, pages 5 through 7.										-	
АТТАСН	15. ld	aho net operatir	ng loss carryforward. Attach Form 5	6			• <u> </u>	15		00				
E			refund if included in federal income					16		00	-			
⋖_			Government obligations					17		00	-			
			o residence devices. Attach Form 39					18 19		00	-			
ERE			care. Attach federal Form 2441 or 1					20		00				
<u>로</u>		•	ts deduction. Attach Form 39					21		00				
N	22. Sc	ocial security an	d railroad benefits, if included in fed	eral income			• [	22		00				
_			ipment donation					23		00	-			
ΑΥ			s deduction. Attach Form CG					24		00	-			
			rings account. Contributions					25 26		00	-			
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			s. Attach Form 39					28		00				
¥	29. TO	OTAL SUBTRAC	TIONS. Add lines 15 through 28.					•			29			00
			D INCOME. Subtract line 29 from li			.1.1					30			00
			erjury, I declare that to the best of m											
	Your sig		eceiving this return, the Idaho State	Date Date	SIUI	11 11)	Paid preparer		hiehaiei	เบ นเรเนรร		rer's EIN, S	SN, or P	TIN
SIGN	•													
HERE	Spouse'	s signature (if a joint	return, BOTH MUST SIGN)	Daytime phone			Address and	ohone numb	er		1			
	•													

31. TOTAL ADJUSTED INCOME. Amount from line 30.	31	00
TAX COMPUTATION. See instructions, pages 7 and 8.		
a. If age 65 or older • Yourself • Spouse		
32. CHECK— b. If blind • Yourself • Spouse		
C. If your parent or someone else can claim you as a dependent,		
Standard check here and enter zero on lines 38 and 59.		
Poeduction For Most 33. Itemized deductions. Attach federal Schedule A. Federal limits apply. • 33 00	$\overline{O}$	
People 34. All state and local income taxes included on federal Schedule A, line 5 • 34		
Single:35. Subtract line 34 from line 33. If you do not use federal Schedule A, enter zero	35	00
\$4,400 36. Standard deduction. See instructions, page 7, if you checked any box on line 32	• 36	00
Head of 37. Subtract the LARGER of line 35 or 36 from line 31. If less than zero, enter zero.	37	00
Household: 38. Multiply \$2,800 by the number of exemptions claimed on line 6d. Federal limits apply	• 38	00
\$6,450 39. Taxable income. Subtract line 38 from line 37. If less than zero, enter zero	• 39	00
Married 40. TAX from tables or rate schedule. See instructions, page 26.	• 40	00
filing CREDITS. Limits apply. See instructions, pages 8 and 9.		•
Jointly: 41. Income taxes paid to other states. \$8,800	$\overline{}$	
Attach Form 39 and a copy of the other state return(s)		
Married 42. Credit for contributions to educational entities		
Separately: 43. Investment tax credit. Attach of the 47. Earned		
45,075		
Qualifying		
widow(er):		
\$7,350 47. Promoter-sponsored event credit		
	49	00
49. TOTAL CREDITS. Add lines 41 through 48	50	00
	30	
OTHER TAXES. See instructions, pages 9 and 10.		00
51. Special fuels tax due. Attach Form 75.	<u> </u>	00
52. Sales/Use tax due on mail order, Internet, and other nontaxed purchases		00
54. Permanent building fund. Check the box if you are receiving Idaho public assistance payments		10 00
55. TOTAL TAX. Add lines 50 through 54.	<ul><li>54</li><li>55</li></ul>	00
DONATIONS. See instructions, page 10.	33	00
56. I wish to donate to the Nongame Wildlife Conservation Fund.	E 4	00
57. I wish to donate to the Children's Trust Fund/Child Abuse Prevention.		00
58. TOTAL TAX PLUS DONATIONS. Add lines 55 through 57.		00
PAYMENTS and OTHER CREDITS. See instructions, page 10.	58	
59. Grocery credit. \$15 per person claimed on line 6d	. 59	00
60. Additional grocery credit. \$15 per person 65 or older claimed on line 32a		00
61. Maintaining a home for family member age 65 or older, or developmentally disabled. Attach Form 39		00
62. Special fuels tax refund • Attach Form 75.	62	00
63. Idaho income tax withheld. Attach Form(s) W-2.		00
64. 2000 Form 51 payment(s) and amount applied from 1999 return	. 64	00
65. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 59 through 64.	65	00
If line 58 is more than line 65, GO TO LINE 66. If line 65 is more than line 58, GO TO LINE 69.		
REFUND or TOTAL DUE. See instructions, pages 10 and 11.		
// TAY DUE - Culturat line /E from line E0	. 66	00
67. Penalty • Interest from the due date • Enter total	. 00	
Check the box if the penalty is due to an ineligible withdrawal from an Idaho medical savings account.	67	00
68. TOTAL DUE. Add lines 66 and 67. Make check or money order payable to the Idaho State Tax Commission	. 68	00
69. OVERPAID. Line 65 minus lines 58 and 67. This is the amount you overpaid • 69		
70. REFUND. Amount of line 69 to be refunded to you.	4	
71 FSTIMATED TAX. Amount of line 69 to be applied to your 2001 estimated tax	.   71	00

# 2000

# IDAHO SUPPLEMENTAL SCHEDULE

§ 39

TC39001

s) as	e year January 1 - Decem	ber 31, 2000, or 1	fiscal year beginning <sub>.</sub>		, 2000	ı, endi	ing		, 2
	s shown on return						Soc	ial Security	y Number
_		- CIII - F							
	I: For Form 40 filers. If				k of this fo	rm.			
١.	Alternative Energy Device	e Deduction. See	instructions, page 20	١.					
,	Year Acquired 7	Type of Device	Total Cost		Percent	t			
_	1. 2000		\$	Х	40%	=	1		
-	2. 1999		\$	Х	20%	=	2		
_	3. 1998		\$	Х	20%	=	3		
-	4. 1997		\$	X	20%	=	4		
-			·						
	5. Total deduction. Add line						5		
	Retirement Benefits Dedu				retirement	benet	fits	•	
	1. If single enter \$17,196, o		•						
	<ol><li>Federal Railroad Retirement</li></ol>								
	<ol><li>Social Security benefits re</li></ol>			_					
	4. Balance. Line 1 minus lin						4		
!	<ol><li>Qualified retirement benef</li></ol>	its included in feder	al income				5		
	€ Enter the amount of the	4 on Elboro seed at 1	ino 21 Forms 40				_		
	6. Enter the smaller of lines						6		
	Other Subtractions. See					ſ	1		
	1. Maintaining a home for th	-					2		
	2. Idaho lottery winnings, les						3		
	3. Income earned on a reserv	•					4		
	4. Self-employment health in						5		
5	5. Other subtractions. Ident	ify							
6	6. Total other subtractions.	Add lines 1 through	5. Enter on line 28, Fo	rm 40.			6		
— ).	Credit for Income Taxes	Paid to Another St	tate. See instructions	, page	21.				
								ttach a	copy of th
	1. Idaho tax, line 40, Form 4								ax return a
	2. Other state's adjusted inc			2					e Form 39
	3. Idaho adjusted income fro					%	1	ach stat redit is c	e for which
/	4. Divide line 2 by line 3. Er							edit is t	Jaimeu.
	5. Multiply line 1 by line 4.						5		
5	, ,	· ita incomo tov arad	lits				6		
5	6. Other state's tax due less	s its income tax creu				ı	-		
6			ine 41, Form 40.				7		
5 6	<ol> <li>Other state's tax due less</li> <li>Enter the smaller of lines</li> <li>Maintaining a Home for a</li> </ol>	5 or 6 here and on li		 Family I	Member W		7		
5 6 7	7. Enter the smaller of lines	5 or 6 here and on li Family Member A	Age 65 or Older, or a l	Family I	Member W		7		
5 6 7	7. Enter the smaller of lines Maintaining a Home for a Developmental Disability.	5 or 6 here and on li Family Member A See instructions,	Age 65 or Older, or a l , pages 21 and 22.	-		ith a			
5 6 7	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  I. Did you maintain a home	5 or 6 here and on li Family Member A See instructions, for an immediate far	Age 65 or Older, or a lage and 22.  The mily member age 65 or a lage and 25.	older and	d provide mo	ith a		Yes	☐ No
5 6 7 : 1	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  1. Did you maintain a home than one-half of his/her su	5 or 6 here and on li Family Member A See instructions, for an immediate far upport? You and you	Age 65 or Older, or a lage and 22.  mily member age 65 or our spouse do not qualify	older and	d provide mo	ith a			☐ No
5 6 7 :.	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  1. Did you maintain a home than one-half of his/her su  2. Did you maintain a home	5 or 6 here and on li Family Member A See instructions, for an immediate far apport? You and you for an immediate far	Age 65 or Older, or a lage and 22.  Mily member age 65 or our spouse do not qualify member with a development.	older and	d provide mo	ith a		Yes Yes	No No
5 6 7 : 1	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  1. Did you maintain a home than one-half of his/her su  2. Did you maintain a home provide more than one-ha	5 or 6 here and on li Family Member A See instructions, for an immediate far apport? You and you for an immediate far If of his/her support?	Age 65 or Older, or a lage, pages 21 and 22.  mily member age 65 or our spouse do not qualify member with a devent.  You and your spouse it	older and	d provide mo	ith a			
5 6 7 7 1 1 1 2 2 2	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  1. Did you maintain a home than one-half of his/her su  2. Did you maintain a home provide more than one-half you answered YES to express the second	5 or 6 here and on li Family Member A See instructions, for an immediate far upport? You and you for an immediate far If of his/her support? ither question, comp	Age 65 or Older, or a lage, pages 21 and 22.  mily member age 65 or our spouse do not qualify member with a devent.  You and your spouse it	older and	d provide mo	ith a			
5 6 7 1 1	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage, pages 21 and 22.  mily member age 65 or our spouse do not qualify.  mily member with a deverse You and your spouse to lete lines 3 and 4.	older and elopmen may qua	d provide mo tal disability llify	ith a		Yes	No No
5 6 7 1 1	7. Enter the smaller of lines  Maintaining a Home for a  Developmental Disability.  1. Did you maintain a home than one-half of his/her su  2. Did you maintain a home provide more than one-half you answered YES to express the second	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or of a lage age age age age age age age age age	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he
5 6 7 7 1 1 2 2 2	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage, pages 21 and 22.  mily member age 65 or our spouse do not qualify.  mily member with a deverse You and your spouse to lete lines 3 and 4.	older and	d provide mo tal disability llify	ith a	e of l	Yes	No No
5 6 7 7 1 1 2 2	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or of a lage age age age age age age age age age	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm
5 6 7 7 1 1 2 2	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or of a lage age age age age age age age age age	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm
5 6 7 7 1 1 1 2 2 2	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or of a lage age age age age age age age age age	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm
5 6 7 1 1	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or our spouse do not qualify mily member with a devergence of the lines 3 and 4.  Social Security Number	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm
5 6 7 1 1	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or our spouse do not qualify mily member with a devergence of the lines 3 and 4.  Social Security Number	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm
5 6 7 1 1	Maintaining a Home for a Developmental Disability.  Did you maintain a home than one-half of his/her such than one-half of his/her such than one-half you maintain a home provide more than one-half you answered YES to each family member you	Family Member A See instructions, for an immediate far upport? You and you for an immediate far if of his/her support? ither question, comp	Age 65 or Older, or a lage age 65 or our spouse do not qualify mily member with a devergence of the lines 3 and 4.  Social Security Number	older and	d provide mo	ith a	e of l	Yes Birth of	No Check he developm

Name(s) as shown on return	Social Secu		er
	l i	1	

Part II:	For Form	43 filers.	If you are	e filing Form	40. use P <i>i</i>	ART I on	the front of	this form.

A. Ot	her Subtractions. See instructions, pages 22 through 24.		Column A Total		Column B Idaho
1.	Adoption expenses	. 1	rotar		Idano
2.	Maintaining a home for the aged and/or developmentally disabled				
3.	Idaho lottery winnings, less than \$600 per prize	-			
4.	Income earned on a reservation by a Native American	9			
5.	Worker's compensation insurance				
6.	Partner's and shareholder's pass-through subtractions	J -			
7.	Insulation of Idaho residence				
7. 8.	Technological equipment donation				
9.	Self-employment health insurance				
	Alternative energy device deduction	9			
10.	••				
	Year Acquired Type of Device Total Cost Percent				
	a. 2000 \$ X 40% =	10a			
	b. 1999 \$ X 20% =	10b			
	c. 1998	10c			
	d. 1997	10d			
11.	Add lines 1 through 10d.	11			
12.					
	a. If single enter \$17,196, if married filing jointly enter \$25,794.	12a			See instructions,
	b. Federal Railroad Retirement and Social Security benefits received	12b			page 23, for qualified
	c. Balance. Line 12a minus line 12b. If less than zero, enter zero	12c			retirement benefits to
	d. Qualified retirement benefits included in federal gross income	12d			be included on lines
	e. Column A benefits. Lesser of line 12c or line 12d	12e			- 12d and 12f.
	f. Qualified retirement benefits included in Idaho gross income	12f			
	g. Divide line 12f by line 12d	12g			%
	h. Column B benefits deduction. Line 12e times line 12g	12h			,
13	Other subtractions. Identify.	4.0			
	Total other subtractions. Column A, add lines 11, 12e, and 13; Columns B, add lines 11, 12h, and 13. Enter on line 43, Form 43.	14			
	edit for Income Taxes Paid to Another State by Part-Year Resinguished and the Part-Year Residents cannot claim this credit. Idaho residents on active military				-
1.	Idaho adjusted income from line 45, Column B, Form 43	. 1		At	tach a copy of the
2.	Other state's adjusted income			in	come tax return and
3.	Amount on lines 1 and 2 taxed by both states				separate Form 39 for
4.	Idaho tax, line 56, Form 43	. 4			ich state for which a
5.	Divide line 3 by line 1. Enter percentage here		%	cr	edit is claimed.
6.				6	
7.					
8.	Dvide line 3 by line 2. Enter percentage here		%		
9.	Multiply line 7 by line 8			9	
10.				10	
C. Cr	edit for Income Taxes Paid to Another State by Idaho Residents e instructions, pages 24 and 25.	on Acti	ve Military Duty.	_	
	. •	4			Attach a conv of the
1.	Idaho tax, line 56, Form 43				Attach a copy of the ncome tax return and
2.	Other state's adjusted income				a separate Form 39 for
· · · · · · · · · · · · · · · · · · ·				each state for which a credit is claimed.	
4.	Divide line 2 by line 3. Enter percentage here.		%		JEUR IS CIAIITIEU.
5.	Multiply line 1 by line 4. Enter amount here.			5	
6.	Other state's tax due less its income tax credits.			6	
7.	Enter the smaller of lines 5 or 6 here and on line 57, Form 43.			7	

TC4300 7-21-00	1							·ARFWM	
For th	e vear	January 1 - December 31, 2000, or fiscal year beg	innina		, 2000,	ending		, 2001	
		Your first name and initial	Last na			<u> </u>	Your So	cial Security Number	
	DAHO bel.	If a joint return, spouse's first name and initial	Last na	me			Spouse's Social Security Number		
	rwise,								
•	e print	Address (number, street and apartment number)					<b>A</b>	IMPORTANT!	
or t	ype.						You r	must enter your SSN(s) above.	
		City, State and Zip Code				Full mont		Yourself	
		Decident Ideha Decident on Asti	Militam	Durter Man	manialama (	Idaho this		Spouse	
	ncy Sta		ve ivilitary	Duty Non	resident F	Part-Year Re	esident	Military Nonresiden	
	for your s			3 .		4 .		5 . 🗀	
		our tax preparer need Idaho income tax forms and in	etruction	s mailed to v	OU poyt year	chock the	hov		
ii yoc	i and y	(MUST MATCH FEDERAL RETURN)		ba. Yourse		ouse	DUX	Enter number of	
(0	1.	Single			If your parent of		alsa sar	boxes checked	
STATUS	2. <u> </u>	Married filing joint return (even if only one had income)  Married filing separate return	S		you as a deper				
Ā	3. <u></u>	Enter spouse's SSN above		-	DO NOT check				
S		and full name here.	XEMPTION	b. Number of	f your depende	nt children	from fed	deral form •	
9	4.	Head of household							
FILING		Enter name of person who qualifies you.	\_	c. Number of	f other depend	ents from fe	ederal fo	orm •	
ш	5.	Qualifying widow(er) with dependent child							
		Year spouse died:  FLECTION CAMPAIGN FLIND Constitution	Dem <u>o</u> c	d. Add lines		Doform	Danu	ublican No specific part	
RE		1 of my income tax to go to the Idaho 7. Yourself 1	2 • [	3 .	4 • 📮	Reform 5	6 · [	ublican No specific part	
HERE		Campaign Fund (\$2 on joint return) 8. Spouse	- •		· · 🗀	·	•		
ES		ages, salaries, tips, etc. Attach Form(s) W-2				_	9	Idaho Amounts	
COPIES		xable interest income. Attach federal Schedule B if over \$				H	10	00	
		vidend income. Attach federal Schedule B if over \$400					11	00	
/-2		imony received					12	00	
ATE W-2		siness income or (loss). Attach federal Schedule C or C-E2				L	13	00	
ΑTI		ipital gain or (loss). If required, attach federal Schedule D.					14	OC	
ST,	15. Ot	her gains or (losses). Attach federal Form 4797				• [	15	OC	
픗	16. IR	A distributions (taxable amount)				·	16	00	
АТТАСН		nsions and annuities (taxable amount)				H	17	00	
F		nts, royalties, partnerships, S corporations, trusts, etc. A				- F	18	00	
		rm income or (loss). Attach federal Schedule F				- F	19	00	
HERE		nemployment compensation					20	00	
뷔		her income. List type and amount				·············•	21	00	
⊢		ADJUSTMENTS. See instructions, page 13.					22	00	
ΙΕΛ		eductions for IRAs and medical savings accounts					23	oc	
X		oving expenses. Attach federal Form 3903 or 3903-F				L L	24	00	
PAYMENT		eductions for self-employment tax, health insurance and re				L	25	00	
		enalty on early withdrawal of savings				F	26	00	
АТТАСН		eductions for student loan interest and alimony paid				L	27	00	
. ~	28. TOTAL ADJUSTMENTS. Add lines 23 through 27.						20		
F	28. 10	TAL ADJUSTIVIENTS. Add lines 23 through 27					28	00	

Paid preparer's signature

Address and phone number

Preparer's EIN, SSN, or PTIN

Within 180 days of receiving this return, the Idaho State Tax Commission may contact the paid preparer to discuss it.

Daytime phone

Your signature

Spouse's signature (if a joint return, BOTH MUST SIGN)

SIGN

**HERE** 

	Form 43 ( TC43001	(2000) -2 7-21-00	Column A - Tot	al	Column B - Idaho	)
· (A	4	30. Enter amount from federal Form 1040, line 33, 1040A, line 19, or 1040EZ,	20	00		
ADDITIONS	3-1-	line 4 in Column A. Enter amount from line 29 in Column B	30	00		00
Ě	See	31. Interest and dividends not taxable under federal law	31	00	•	00
ADI	See pages 13-14	32. Other additions. See instructions and attach explanation	32	00	•	00
		33. Income after additions. Add lines 30, 31 and 32.	33	00		00
		34. Idaho net operating loss carryforward. Attach Form 56	34	00	•	00
		35. State income tax refund included in line 30, Column A	35	00		00
		36. Interest from U.S. Government obligations	36	00	•	00
NS	ω	37. Child/dependent care. Attach federal Form 2441 or 1040A, Schedule 2	37	00	•	00
임	4-1	38. Social security and railroad benefits included in line 30, Column A	38	00	•	00
SUBTRACTIONS	See pages 14-15	39. Idaho capital gains deduction. Attach Form CG.	39	00	•	00
BTF	oage	40. Idaho resident - Active duty military pay earned outside of Idaho	40	00	•	00
S	_	41. Idaho medical savings account - contributions and interest	41 42	00		00
		42. College savings program	43	00		00
		43. Other subtractions. Attach Form 39	44	00	•	00
		45. TOTAL ADJUSTED INCOME. Subtract line 44 from line 33.	<del>-  </del>	00	•	00
		46. a. Check if age 65 or older • Yourself • Spouse				
		c. If your parent or someone else can claim you as a dependent, c			· —	
	Star	47. Itemized deductions. Attach federal Schedule A. Federal limits				00
	Dedu	uction   48 All state income taxes included on federal Schedule A line 5		•	48	00
		Most ople 49. Subtract line 48 from line 47.			49	00
œ	100	50. Standard deduction. See instructions, page 16, if you checked ar	ny boxes on line 46		50	00
15-1		ngle: 51. Multiply \$2,800 by the number of exemptions claimed on line 6d.	Federal limits apply.		51	00
ss 1		52. Add line 51 and the LARGER of line 49 or line 50			52	00
pages	Hea	ad of 53. Idaho percentage. Divide line 45, Column B, by line 45, Column A	A	1	53	%
See		sehold:   54. Multiply amount on line 52 by the percentage on line 53 and ente	r the result here		54	00
		55. Idaho taxable income. Subtract line 54 from line 45, Column B.		55	00	
		Married filing Jointly: 56. TAX from tables or rate schedule. See instructions, page 26			56	00
CREDITS		57. Income taxes paid to other states. Attach Form 39 & other state	return	• <u> </u>	57	00
_	Marrio	ed filing 58. Credit for contributions to educational entities			58	00
ΑX	Sepa	rately: 59. Investment tax credit. Attach Form 49. Earned •	Allowed		59	00
_		60. Credit for contributions to youth and rehabilitation facilities			60	00
	Qual	lifying 61. Credit for production equipment using post-consumer waste		• [	61	00
	Wido	ow(er): 62. Natural resources conservation credit			62	00
	\$7,	.350 63. Promoter-sponsored event credit			63	00
		64. Credit for qualifying new employees. Attach Form 55		······• [	64	00
		65. Line 56 minus lines 57 through 64. If less than zero, enter zero.			65	00
S		66. Special fuels tax due. Attach Form 75.		•	66	00
OTHER TAXES	18	67. Sales/Use tax due on mail order, Internet, and other nontaxed purchases .		······ • [	67	00
R T	See page 1	68. Tax from recapture of Idaho investment tax credit. Attach Form 49R		•	68	00
퓓	bad	69. Permanent building fund. Check the box if you are receiving Idaho public a	ssistance payments	• 🔲	69 10	00
		70. TOTAL TAX. Add lines 65 through 69.		-	70	00
DONATIONS	œ	71. I wish to donate to the Nongame Wildlife Conservation Fund			71	00
) H	See ige 18	72. I wish to donate to the Children's Trust Fund/Child Abuse Prevention			72	00
NO	See				73	
		73. TOTAL TAX PLUS DONATIONS. Add lines 70 through 72.			-	00
		74. Grocery credit. Nonresidents do not qualify. See instructions, page 18				00
TS	-19	75. Maintaining a home for family member age 65 or older, or developmentally of			75	00
ME	, 18	76. Special fuels tax refund • Gasoline tax refund •			76	00
PAYMENTS	See pages 18-19	77. Idaho income tax withheld. Attach Form(s) W-2				00
Δ.	ă	78. 2000 Form 51 payment(s) and amount applied from 1999 return				00
		79. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 74 through 78.			79	00
		If line 73 is more than line 79, GO TO LINE 80. If line 79 is more than line 73	, GO TO LINE 83.			
		80. TAX DUE. Subtract line 79 from line 73.			80	00
DG.		81. Penalty • Interest from the due date •	Enter total	<u></u> †		
AL	~	Check box if penalty is due to an ineligible withdrawal from an Idaho media	cal savings account.	• 🔲	81	00
TOT	See page 19	82. TOTAL DUE. Add lines 80 and 81.		•	82	00
REFUND / TOTAL DUE	Spage	83. OVERPAID. Line 79 minus lines 73 and 81		00		
Ĭ	_			00		
REF		84. REFUND. Amount of line 83 to be refunded to you.				
		85. ESTIMATED TAX. Amount of line 83 to be applied to your 2001 estimate	d tax.	•	85	00

### 2000 TC00091 8-29-00

# **IDAHO CAPITAL GAINS DEDUCTION**

° CG

(See instructions for qualifying Idaho property.)

Name	Name(s) as shown on return							
1.	List qualifying capital gair	ns and losses.						
	a. Description of property and Idaho location	b. Date acquired (mo., day, yr.)	c. Date sold (mo., day, yr.)	d. Sales price	e. Cost or other bas	is	f. Gain or	(loss)
2.	Qualifying capital gain fro	m sale of person	al residence froi	m federal Schedule D		2		
3.	Qualifying capital gain or	(loss) from instal	Iment sales. At	ttach federal Form 62	52	3		
4.	Qualifying capital gain or	(loss) from sales	of business pro	perty. Attach federal	Form 4797	4		
5.	Qualifying capital gain or	(loss) from partne	erships, S corpo	orations, estates or tru	sts	5		
6.	Add amounts in column f	of line 1 and line	es 2 through 5.			6		
7.	Qualifying capital loss car	ryover. See inst	ructions			7		
8.	Net gain or (loss). Subtract	ct line 7 from line	e 6			8		
9.	If line 8 is a gain, multiply	line 8 by 60%.				9		
10.	Net capital gain included i	n income. See ii	nstructions			10		
11.	Enter the smaller of line 9	or 10 here and	on line 24, Forn	n 40 or line 39, Form	43.	11		

#### Instructions for Idaho Form CG

#### General Information

Form CG is used by individuals to compute the Idaho capital gains deduction. The deduction is 60% of the net capital gain from the sale of Idaho property. Only capital gains from the following Idaho property qualify:

- (a) Real property held for at least 18 months, or
- (b) Tangible personal property used in a revenue-producing enterprise and held for at least 12 months. A revenueproducing enterprise means:
  - Producing, assembling, fabricating, manufacturing or processing any agricultural, mineral or manufactured product;
  - Storing, warehousing, distributing or selling at wholesale any products of agriculture, mining or manufacturing;
  - Feeding livestock at a feedlot;
  - Operating laboratories or other facilities for scientific, agricultural, animal husbandry or industrial research, development or testing.
- (c) Cattle and horses held for at least 24 months, and other livestock used for breeding held for at least 12 months, if the owner received more than one-half of his gross income from farming or ranching in Idaho, or
- (d) Timber held for at least 24 months.

# NOTE: Gains from the sale of stocks and other intangibles do not qualify.

Refer to the Internal Revenue Code for definitions of capital assets, short-term and long-term capital gains and losses, computations of basis, and gain from disposition of depreciable property.

"Net capital gain" means the excess of net long-term capital gain over the net short-term capital loss for the year. When computing the net capital gain to which the 60% deduction applies, only gains and losses from qualifying property may be used.

A capital loss carryover from qualifying property reduces the current year gains from eligible property. Losses from property not eligible for this deduction do not reduce gains from eligible property. The Idaho capital gains deduction cannot exceed the net capital gain reported on the return. Gains treated as ordinary income do not qualify for the deduction.

#### S Corporations, Partnerships, Trusts and Estates

Capital gain from qualifying property, described above, held by S corporations, partnerships, trusts and estates, is eligible for the Idaho capital gains deduction. To claim the deduction, the individual shareholder or partner must have held the S corporation or partnership interest for the holding period specified for that type of property.

The amount of gain or loss must be computed by the S corporation, partnership, trust or estate. The deduction is claimed on the return of the individual shareholder, partner or beneficiary. The partnership, S corporation, trust or estate must provide supplemental information to the partners, shareholders, or beneficiaries identifying the pass-through of qualifying capital gain. The holding period of the partner, shareholder or beneficiary interest and the holding period of the qualifying property must be listed.

#### Specific Instructions

- **Line 1.** List qualifying capital gains and losses. (Do not include gains and losses reported on lines 2 through 5.)
- Column a Describe the type of property. Identify the Idaho location at the date of sale.
- Column b Identify the month, day, and year the property was acquired.
- Column c Identify the month, day, and year the property was
- Column d Enter the sales price.
- Column e Enter the cost or other basis. Basis is computed under the appropriate provisions of the Internal Revenue Code.
- Column f Compute your gain or loss by subtracting your basis (column e) from the sales price (column d).
- **Line 2.** Enter the taxable gain from the sale of your Idaho home, from federal Schedule D. If you are reporting a gain that qualifies from previous installment sales, see line 3.
- Line 3. If you used federal Form 6252 to report the installment method for the gain on the sale of eligible property on your federal return, compute your capital gains deduction using the current year's taxable portion of the installment payment.
- Attach federal Form 6252. Capital gain from an installment sale is not eligible for the Idaho capital gains deduction if the

- property was not held for the minimum holding period by the date sold.
- **Line 4.** Enter the eligible net capital gain from federal Form 4797. Do not include ordinary gains reported on Part II of federal Form 4797.
- Line 5. Enter qualifying capital gain or loss from partnerships, S corporations, trusts and estates. Attach a copy of the Schedule K-1 from the partnership, S corporation, trust or estate. Identify the type of property sold, the date of sale, the holding period of the property by the partnership, S corporation, trust or estate, and the holding period of the partnership or S corporation interest.
- **Line 6.** Enter the total of gains and losses in column f for lines 1 through 5.
- **Line 7.** Enter the total qualifying capital loss carryover from the prior year's return.
- Line 9. If line 8 is a gain, enter 60% of line 8. If line 8 is a loss, you cannot claim this deduction.
- **Line 10.** Enter your net capital gain included in federal adjusted gross income. This is the capital gain from federal Form 1040, line 13.
- **Line 11.** Compare lines 9 and 10. Enter the smaller amount here and on line 24, Form 40 or line 39, Form 43. This is your ldaho capital gains deduction.

# **IDAHO INVESTMENT TAX CREDIT**

2000

For the year January 1 - December 31, 2000, or fiscal year beginning	, 2000, ending
Name(s) as shown on return	Social Security Number or EIN
PART I CREDIT AVAILABLE SUBJECT TO LIMITATION	<u> </u>
1. Amount of qualified investments acquired during the tax year. Attach a complete	e list 1
2. Credit earned. Multiply line 1 by 3%	2
3. Pass-through share of credit from a partnership, S corporation, estate or trust	
4. Credit received through unitary sharing. Attach a schedule	4
5. Carryover from prior years' investment credit. Attach Form 49C or other schedul	e 5
6. Credit distributed to partners, shareholders or beneficiaries	
7. Credit shared with unitary affiliates	
8. Total credit available subject to limitation. Add lines 2 through 5 and subtract line	es 6 and 7.
PART II LIMITATION (For use only by taxpayers not also claiming the credit for qualifying new	employees)
1. Idaho income tax liability. Enter the amount from the appropriate income tax retu	rn 1
2. Credit for taxes paid to other states	
3. Subtract line 2 from line 1.	3
4. Investment tax credit from line 8, Part I	
5. Multiply line 3 by 50%	
6. Enter the smaller of line 4 or line 56	
7. Credit for contributions to educational entities	
8. Total of nonrefundable credits available. Add lines 6 and 7	8
9. If line 8 is greater than line 3:	
a. Subtract line 3 from line 8.	
b. Credit allowed. Subtract line 9a from line 6. If negative, enter zero	9b
10. If line 8 is equal to or less than line 3, enter the amount on line 6. This is the cred	dit allowed. 10

#### QUALIFYING DEPRECIABLE PROPERTY

Idaho generally follows the definition of qualified property found in the Internal Revenue Code (IRC), Sections 46 and 48 as in effect prior to 1986. The property must have a useful life of three years or more and be property for which you are allowed the deduction for depreciation or amortization in lieu of depreciation. Qualifying property includes the following property used in a trade or business:

- Tangible personal property machinery and equipment
- Other tangible property property used as an integral part of manufacturing, production, extraction, or furnishing transportation, communications, or utility services, or research facilities and bulk storage facilities used in connection with those businesses
- · Elevators and escalators
- Single purpose agricultural or horticultural structures
- · Qualified timber property
- Petroleum storage facilities

#### NONQUALIFYING PROPERTY

#### Property that does not qualify includes:

- · Buildings and their structural components
- Property used in certain lodging facilities
- The cost of property expensed under Section 179, IRC
- Property subject to 60-month amortization
- Used property not acquired by purchase
- Property that is either nondepreciable or has a useful life of fewer than three years
- The portion of property used for personal use
- Used property in excess of \$150,000
- Horses

#### Idaho exceptions to IRC Sections 46 and 48

Idaho law specifically excludes the following property from qualifying for the Idaho investment tax credit:

- · Property not used in Idaho
- · Vehicles under 8,000 pounds gross weight

### Instructions for Idaho Form 49

#### **GENERAL INSTRUCTIONS**

Form 49 is used to calculate the Idaho investment tax credit earned or allowed. Each member of a unitary group of corporations that earns or is allowed the credit must complete a separate Form 49.

#### Property Used Both In and Outside Idaho

If property is used both in and outside Idaho, compute the qualified investment for all such property using one of the following methods:

- Percentage-of-use method:
   Multiply the investment in each asset by a fraction where Idaho use is the numerator and total use is the denominator.
   Usage can be measured by machine hours, mileage or any other method that accurately reflects the usage, or
- Property factor numerator method:
   Use the amount included in the Idaho property numerator for each property.

#### **Carryover Periods**

- The credit carryover is limited to five years for property acquired prior to 1990.
- For property acquired on or after January 1, 1990, the credit carryover is limited to seven years unless the credit carried over did not expire in 1999. If the credit is available to be carried over to taxable years beginning in 2000, the carryover period is extended to 14 years.
- For credit earned in taxable years beginning on or after January 1, 2000, the credit carryover is limited to 14 years.

#### SPECIFIC INSTRUCTIONS

Instructions are for lines not fully explained on the form.

#### PART I - CURRENT YEAR'S CREDIT AVAILABLE

**Line 1.** Attach a list of all property for which you are claiming an investment tax credit. The list should identify each piece of property, your basis in the item and the date acquired.

Line 3. Enter the amount of Idaho investment tax credit that is being passed through by partnerships, S corporations, estates or trusts in which you have an interest. Attach a copy of the schedule provided to you.

**Line 4.** If you are a member of a unitary group, enter the amount of credit you received from another member of the unitary group.

**Line 5.** Enter the investment tax credit carryover from prior years. The amount is computed on Form 49C or on a separate schedule. Attach a copy of Form 49C or the schedule. See GENERAL INSTRUCTIONS for the carryover period allowed.

**Line 6.** If you are a partnership, S corporation, trust or estate, enter the amount of credit that passed through to partners, shareholders, or beneficiaries.

**Line 7.** If you are a member of a unitary group, enter the amount of credit you earned that you elect to share with other members of your unitary group. Before you can share your credit, you must use the credit up to the allowable limitation of your tax liability.

Corporations claiming investment tax credit must provide a calculation of the credit earned and used by each member of the combined group. The schedule must clearly identify shared credit and the computation of any credit carryovers.

#### **PART II - LIMITATION**

If the credit for qualifying new employees is not claimed, use Part II to compute the investment tax credit limitation. The investment tax credit is limited to 50% of your tax liability.

If the credit for qualifying new employees is claimed, the investment tax credit is limited to 45% of your tax liability. Calculate the limitation on Form 55, Credit for Qualifying New Employees.

The following credits must be applied to the tax before the investment tax credit:

- · Credit for tax paid other states, and
- Credit for contributions to Idaho educational entities.
- **Line 1.** Enter the amount of your income tax liability. Income tax liability is the computed tax before adding the permanent building fund tax, any other taxes or subtracting any credits.
- Line 2. Individuals enter the credit computed on Form 39.
- **Line 9.** The total of nonrefundable credits claimed cannot exceed line 3. Unused credit is available for carryover or unitary sharing.



# **IDAHO INVESTMENT TAX CREDIT CARRYOVER**

2000

For the year January	y i - December	31, 2000, or fisca	ai year beginning _		, 2000, ending			
me(s) as shown on return						Social Security Number or EIN		
	A 1993	B 1994	C 1995	D 1996	E 1997	F 1998	G 1999	
. Credit earned								
2. Allowed/used in 1993								
Recaptured in 1993								
. Allowed/used in 1994								
. Recaptured in 1994			-					
. Allowed/used in 1995								
. Recaptured in 1995				-				
. Allowed/used in 1996								
. Recaptured in 1996					-			
. Allowed/used in 1997								
. Recaptured in 1997								
. Allowed/used in 1998								
3. Recaptured in 1998								
Allowed/used in 1999								
5. Recaptured in 1999								
. Recaptured in 2000								
. In each column, add lines 2 through 16								
In each column, subtract line 17 from line 1								
2. Carryover to 2000. Total colu	umns A through G, I	ine 18. Carry to line 5	5, Part I, Form 49.					

### Instructions for Idaho Form 49C

Complete this form if an investment tax credit carryover is included in the current year's available credit. Once the Form 49C is completed, the carryover will be carried to Form 49.

#### Carryover Period

Unused credit earned on investments made after 1989 may be carried forward up to seven taxable years. Unused credit that was carried forward to 1999 but was not fully used in 1999 may be carried forward 14 taxable years from the year of the investment. Unused credit for qualified investments made in taxable years beginning in 2000 and later may be carried forward 14 taxable years.

#### Conversion of a C Corporation to S Corporation

An investment tax credit carryover earned by a C corporation that has converted to an S corporation is allowed against the S corporation's tax on built-in gains, net capital gains, and excess net passive income. The credit is not allowed against the tax paid by an S corporation for non-resident shareholders. A separate Form 49C should be used to account for this credit carryover.

#### Replacement Property Acquired Before 1995

Carryovers of credit for property acquired prior to January 1, 1995 may not include property acquired as replacement property unless you replaced the property solely due to technical obsolescence.

#### Use of Other Schedules

If this form does not allow you to properly reflect the application of carryovers and recapture, you may provide the information on a separate schedule.

#### SPECIFIC INSTRUCTIONS

Lines 2, 4, 6, 8, 10, 12, and 14. For each year, enter the amount of credit allowed against tax, the amount of credit you earned that was shared with another member of the unitary group, and the amount of credit that passed through to an owner or beneficiary.

# ${{\begin{smallmatrix} F\\ O\\ R\\ M \end{smallmatrix}}}{{\begin{smallmatrix} TC49R91\\ 5-25-00 \end{smallmatrix}}}$ RECAPTURE OF IDAHO INVESTMENT TAX CREDIT

For the year January 1 - December	31,, or	fiscal year begin	ning	, ending _	
Name(s) as shown on return				Social Security Number	or EIN
PART I IDENTIFY PROPERTY	THAT CEASED TO	QUALIFY AS ID	OAHO INVESTME	NT TAX CREDIT	F PROPERTY
Properties		Property	Description		
А					
В					
С					
D					
E					
PART II ORIGINAL IDAHO INV	ESTMENT TAX CR	REDIT			
		1	Properties		
	A	В	С	D	E
Date property was placed in service					
2. Cost or other basis					
<ul> <li>3. Credit percentage</li></ul>		3%	3%	3%	3%
and the date on line 5  PART III COMPUTATION OF R	PECAPTURE TAX				
7. Recapture percentage from table, page 2					
9. Add line 8, columns A through E	Ξ				
10. Pass-through of credit recapture	e from S corporations,	, partnerships, est	tates or trusts		
<ul> <li>11. Add lines 9 and 10</li> <li>12. Enter the portion of original credit than line 11. Any unused credit</li> <li>13. Recapture of investment tax credite of your tax return. Do not un</li> </ul>	dit on line 4 not used t on this line cannot b edit. Subtract line 12	to offset tax in ar be used as a carry from line 11. En	ny year. Do not en over ter here and on the	ter more  proper	
computed on Form 49.					

### Instructions for Idaho Form 49R

Use Form 49R to compute the increase in tax for the recapture of investment tax credit. You must recompute the credit if you earned it in an earlier year, but disposed of the property before the end of its estimated useful life. You must also recompute the credit on any property ceasing to qualify as investment tax credit property. Property moved from Idaho ceases to qualify as investment tax credit property and is subject to recapture.

S corporations, partnerships, estates and trusts that pass through investment tax credit to the shareholders, partners or beneficiaries must provide schedules detailing the recapture information required to compute the recapture on their income tax returns.

Any resulting tax on recapture of prior credits must be added to the tax otherwise determined in the year of recapture.

#### PART I

Lines A through E. Describe the property for which you must recompute the investment tax credit. Fill in lines 1 through 8, in Parts II and III for each property on which you are recomputing the credit. Use a separate column for each item. Use an additional Form 49R, or other schedule with all the information shown on Form 49R, if you have Idaho investment tax credit recapture on more than five items.

#### PART II

- **Line 1.** Enter the month, day and year that the property was first available for service.
- **Line 2.** Enter the cost or other basis of the property used to compute the original investment tax credit.
- **Line 4.** Multiply line 2 by line 3 to compute the credit originally earned for each property item listed.
- **Line 5.** Enter the date the property ceased to qualify as investment tax credit property.

**Line 6.** Do not enter partial years. If property was held less than 12 months, enter zero.

#### **PART III**

- **Line 7.** Enter the appropriate recapture percentage from the table below.
- **Line 8.** Multiply line 4 by line 7. This is the tentative tax recaptured.
- **Line 9.** Add line 8 in columns A through E. Enter the total from all pages here.
- Line 10. S corporations, partnerships, estates and trusts that have property subject to recapture must complete lines 1 through 9 to determine the amount of credit recapture. A copy of this form and a schedule detailing each shareholder's, partner's, or beneficiary's pass-through share of the recapture amount must be attached to the business' income tax return and to each K-1.

Partners, shareholders and beneficiaries will use the information provided by the partnership, S corporation, trust or estate to report their pass-through share of the credit to be recaptured on line 10.

- **Line 11.** Add lines 9 and 10 to determine the amount of credit subject to recapture.
- Line 12. If you did not use all the credit you originally computed either in the year earned or in a carryover year, you will not have to pay tax on recapture of the amount of the tax credit you did not use.

Compute the unused portion of the original credit on a separate sheet and enter it on this line. Do not enter more than the recapture tax on line 11.

Line 13. This is the total increase in tax. Enter it on the proper line of your tax return. DO NOT use this amount to reduce your current year's investment tax credit from Form 49.

# TABLE FOR RECAPTURE OF INVESTMENT TAX CREDIT (Section 50, Internal Revenue Code)

Time held and/or time qualifying	Recapture percent
less than 1 year	100%
more than 1 year less than 2 years	80%
more than 2 years less than 3 years	60%
more than 3 years less than 4 years	40%
more than 4 years less than 5 years	20%



# IDAHO CREDIT FOR QUALIFYING NEW EMPLOYEES

2000

FOI	the year January 1 - December 31, 2000, or riscal year beginning, 2000,	enaing	
Nam	e(s) as shown on return	ocial Secu	rity Number or EIN
P	ART I - CREDIT AVAILABLE SUBJECT TO LIMITATION		
	The average number of qualifying employees during the tax year	1	
2.	The average number of qualifying employees during the three preceding tax years		
3.	The average number of qualifying employees during the preceding tax year		
4.	Subtract the greater of line 2 or 3 from line 1 and enter the difference. This is the number of qualifying new employees. The amount must equal or exceed one.		
5.	Multiply the number on line 4 by \$500	5	
	Enter the net income of the revenue-producing enterprise within which the new employment occurred. 6		
7.	Multiply the number on line 6 by .0325		
8.	Enter the smaller of line 5 or line 7.	8	
9.	Enter the pass-through share of credit from an S corporation, partnership, estate or trust	9	
10.	Credit available prior to distributions. Add lines 8 and 9.	10	
11.	Enter the portion of line 10 distributed to owners or beneficiaries of S corporations, partnerships, estates or trusts.	11	
12.	Total credit available subject to limitation. Subtract line 11 from line 10. Carry to Part II, line 27.	12	

See Part II, Limitation on back of form.

Page 2

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PART II. CREDIT LIMITATIONS Use if you are allowed the Credit for Qualifying New Employees				
Enter the Idaho income tax liability from your tax return			1	
	Inter your credit for tax paid to other states.			2
	Subtract line 2 from line 1			3
	Enter 45% of line 3.	-		3
	Enter your credit for contributions to educational entities.	5		
Ο.	Compute your allowable credit for contributions to educational entities:			
	a. If line 5 is less than line 4, enter the amount from line 5.			
	b. If line 5 is equal to or larger than line 4, enter the amount from line 4. See instructions.	7		6
	Enter your available investment tax credit from Form 49, Part 1, line 8			
	Add lines 6 and 7.	8		
9.	Compute your allowable investment tax credit:			
	a. If line 8 is smaller than line 4, enter the amount from line 7.			
	b. If line 8 is equal to or larger than line 4, subtract line 6 from line 4.			
	Enter the difference here. See instructions.			9
10.	Add lines 6 and 9.			10
11.	Enter your credit for contributions to youth and rehabilitation facilities	11		
12.	Add lines 10 and 11.	12		
13.	Compute your allowable credit for contributions to youth and rehabilitation facilities:			
	a. If line 12 is smaller than line 4, enter the amount from line 11.			
	b. If line 12 is equal to or larger than line 4, subtract line 10 from line 4.			
	Enter the difference here. See instructions.			13
14	Add lines 10 and 13.			14
	Enter your credit for production equipment using post-consumer waste	-		
	Add lines 14 and 15			
	Compute your allowable credit for production equipment using post-consumer waste:	10		
	a. If line 16 is smaller than line 4, enter the amount from line 15.			
	b. If line 16 is equal to or larger than line 4, subtract line 14 from line 4.			
	Enter the difference here. See instructions.			17
1Ω	Add lines 14 and 17.			18
				10
	Enter your natural resources conservation credit.			
		20		
21.	Compute your allowable natural resources conservation credit:			
	a. If line 20 is smaller than line 4, enter the amount from line 19.			
	b. If line 20 is equal to or larger than line 4, subtract line 18 from line 4.			
	Enter the difference here. See instructions.			
	Add lines 18 and 21.			22
	Enter your promotor-sponsored event credit.	1		
		24		
25.	Compute your allowable promoter-sponsored event credit:			
	a. If line 24 is smaller than line 4, enter the amount from line 23.			
	b. If line 24 is equal to or larger than line 4, subtract line 22 from line 4.			
	Enter the difference here. See instructions.			25
	Add lines 22 and 25.			26
27.	Enter your credit for qualifying new employees.	27		
	Add lines 26 and 27.	28		
29.	Compute your allowable credit for qualifying new employees:			
	a. If line 28 is smaller than line 4, enter the amount from line 27.			
	b. If line 28 is equal to or larger than line 4, subtract line 26 from line 4.			
	Enter the difference here. See instructions.			29

#### Instructions For Idaho Form 55

Idaho Form 55 is used by individuals, corporations, partnerships, estates or trusts that have earned the Idaho credit for qualifying new employees. Each member of a unitary combined group that files a group return must complete a separate Form 55 to compute its earned credit.

A partnership, S corporation, estate or trust must prepare and distribute to each owner or beneficiary a schedule that shows his proportionate share of any pass through of the Idaho credit for qualifying new employees as well as any other applicable credits. A copy of this schedule and the federal Schedule K-1 that is furnished to each owner or beneficiary must be attached to the Idaho partnership, S corporation, fiduciary income tax return. Each partner, shareholder, member or beneficiary must attach a copy of this schedule to his individual Idaho income tax return.

The maximum credit available is \$500 for each qualifying new employee. "New employee" means a person who is subject to Idaho income tax withholding, employed by the taxpayer in a revenue-producing enterprise, and covered for unemployment purposes under Idaho Code. A person shall be considered employed by the taxpayer in a revenue-producing enterprise if the person is employed by the taxpayer on a full-time basis or on a part-time basis if the person works at least 20 hours per week.

No credit will be earned unless the new employee has worked for the taxpayer for a minimum of nine months during the tax year for which the credit is claimed.

Idaho unemployment reports will be the basis for computing the number of employees. However, only employees meeting the definition of "new employee" can be included in the computation of the credit for qualifying new employees. Records must be maintained to support the computation.

The number of qualifying new employees is the excess of the average number of qualifying employees during the tax year over the greater of the average number of qualifying employees during the three preceding tax years or the average number of qualifying employees during the preceding tax year. The number of qualifying new employees must be rounded to the nearest tenth (1/10).

The credit may not exceed 3.25% of the net income of the revenue-producing enterprise. A "revenue-producing enterprise" means an Idaho business that begins with a natural resource and produces, assembles, fabricates, manufactures, or processes a value-added product.

Operations involving wholesale or retail sales, professional, managerial, repairs or services generally do not qualify. Idaho businesses that consume a natural resource in a process, but do not add value to the natural resource do not qualify.

#### PART I - CREDIT AVAILABLE SUBJECT TO LIMITATION

**Lines 1 and 3.** Determine the average number of qualifying employees during the tax year by adding the number of qualifying employees reported for each month on your Idaho unemployment reports and dividing that sum by the number of months of operation during the year.

**Line 2.** Determine the average number of qualifying employees during the three preceding tax years by dividing the total of the average number of qualifying employees reported for each preceding year by 3.

Line 4. No credit is allowed unless the number on this line equals or exceeds one (1). If it is greater than one (1), the

number is rounded to the nearest one-tenth (1/10).

Line 6. The credit is limited to 3.25% of the net income of the qualifying business in which the new employment occurred. If one business is engaged in two activities, one that qualifies as a "revenue-producing enterprise" and one that does not, and at least 50% of the taxpayer's total Idaho employees are performing personal services in the revenue-producing enterprise, the taxpayer may treat the entire Idaho business as a revenue-producing enterprise. Enter the amount of net income from the proprietorship, farm, partnership, fiduciary or corporation income tax return that is from Idaho activities.

If one business is engaged in two activities, one that qualifies as a "revenue-producing enterprise" and one that does not, and less than 50% of the taxpayer's total Idaho employees are performing services in the revenue-producing enterprise, the taxpayer must calculate qualifying employees and the net income limitation based on that portion of the Idaho business that qualifies as a revenue-producing enterprise. The amount of net income for the portion of the business that qualifies as a revenue-producing enterprise is calculated by dividing the number of employees in the revenue-producing enterprise by the total number of employees in the entire business. Multiply the net income from the proprietorship, farm, partnership, fiduciary or corporation income tax return that is from Idaho activities by this percentage. Enter the result on line 6.

- **Line 8.** The earned credit is the smaller of line 5 or line 7.
- **Line 9.** Enter the pass-through share of credit from S corporation, partnership or fiduciary return.

**Line 11.** For S corporations, partnerships, estates or trusts, enter the credit passing through to the shareholders, partners, members or beneficiaries. Idaho tax credits must pass through to the shareholders, partners, members or beneficiaries in the same manner and to the extent that income or loss passes through.

#### PART II - CREDIT LIMITATIONS

Any taxpayer earning the Idaho credit for qualifying new employees must complete Part II to determine the limitation on the credit for qualifying new employees and all other nonrefundable credits. The limitation is 45% of the income tax after credit for taxes paid to other states.

Idaho Code Section 63-3029H provides that credits must be claimed in the following order:

- Credit for taxes paid to other states (individuals, estates or trusts),
- 2. Credit for contributions to Idaho educational institutions,
- 3. Idaho investment tax credit,
- 4. Credit for contributions to Idaho youth facilities, rehabilitation facilities and nonprofit substance abuse centers,
- Credit for equipment using post-consumer waste or postindustrial waste,
- 6. Natural resources conservation credit,
- 7. Promoter-sponsored event credit.

These credits must be applied to the tax before the credit for qualifying new employees. Refer to instructions for the appropriate income tax return to compute the credits.

If a taxpayer claims both an Idaho investment tax credit and an Idaho credit for qualifying new employees, the 45% limitation applies to the Idaho investment tax credit as well.

- Line 1. Enter the amount of income tax liability from the appropriate income tax return. The income tax liability is the computed tax before adding the Permanent Building Fund Tax or any other taxes or subtracting any credits.
- **Line 2.** Enter the amount of credit for taxes paid to other states. This credit is only available to individuals, estates and trusts.
- **Line 5.** Enter the amount of credit for contributions to educational entities from the appropriate Idaho income tax return.
- **Line 6a.** This is the amount of credit for contributions to educational entities you may claim. Enter this amount on the appropriate line of your Idaho income tax return.
- **Line 6b.** If line 5 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Enter the amount from line 4 and enter this amount on the appropriate line of your Idaho income tax return. This is your allowable credit for contributions to educational entities. Do not complete the rest of this form.

- **Line 7.** Enter the amount of your investment tax credit from Form 49, Part I, line 8.
- **Line 9a.** This is the amount of investment tax credit you may claim on your Idaho income tax return. Enter this amount on the appropriate line of your Idaho income tax return.
- **Line 9b.** If line 8 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Subtract line 6 from line 4. This is the amount of investment tax credit you may claim on your Idaho income tax return. Enter this amount on the appropriate line of your Idaho income tax return. The unclaimed portion of your investment tax credit may be eligible for carry forward to next year. Do not complete the rest of this form.

- **Line 11.** Enter the amount of your credit for contributions to youth and rehabilitation facilities and nonprofit substance abuse centers from the appropriate Idaho income tax return.
- Line 13a. This is the amount of credit for contributions to youth rehabilitation facilities and nonprofit substance abuse centers you may claim. Enter this amount on the appropriate line of your Idaho income tax return.
- Line 13 b. If line 12 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Subtract line 10 from line 4. This is the amount of credit for contributions to youth and rehabilitation facilities and nonprofit substance abuse centers you may claim. Enter this amount on the appropriate line of your Idaho income tax return. Do not complete the rest of this form.

**Line 15.** Enter the amount of your credit for production equipment using post-consumer waste from the appropriate Idaho income tax return.

- **Line 17a.** This is the amount of credit for production equipment using post-consumer waste you may claim. Enter this amount on the appropriate line of your Idaho income tax return.
- Line 17b. If line 16 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Subtract line 14 from line 4. This is the amount of credit for production equipment using post-consumer waste you may claim. Enter this amount on the appropriate line of your Idaho income tax return. The unclaimed portion of this credit may be eligible for carry forward to next year. Do not complete the rest of this form.

- **Line 19.** Enter the amount of your natural resources conservation credit from the appropriate Idaho income tax return.
- **Line 21a.** This is the amount of natural resources conservation credit you may claim. Enter this amount on the appropriate line of your Idaho income tax return.
- Line 21b. If line 20 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Subtract line 18 from line 4. This is the amount of natural resources conservation credit you may claim. Enter this amount on the appropriate line of your Idaho income tax return. Do not complete the rest of this form.

- Line 23. Enter the amount of your promoter-sponsored event credit from the appropriate Idaho income tax return.
- **Line 25a.** This is the amount of promoter-sponsored event credit you may claim. Enter this amount on the appropriate line of your Idaho income tax return.
- Line 25b. If line 24 is equal to or larger than line 4, you cannot claim the credit for qualifying new employees this year. The full amount of earned Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.

Subtract line 22 from line 4. This is the amount of promotersponsored event credit you may claim. Enter this amount on the appropriate line of your Idaho income tax return. Do not complete the rest of this form.

- Line 27. Enter the amount of your earned credit for qualifying new employees from Part I, line 12.
- **Line 29a.** This is the amount of credit for qualifying new employees you may claim. Enter this amount on the appropriate line of you Idaho income tax return.
- **Line 29b.** Subtract line 26 from line 4. This is the amount of credit for qualifying new employees you may claim. Enter this amount on the appropriate line of your Idaho income tax return.

The earned but unused Idaho credit for qualifying new employees may be available to be carried forward to the succeeding tax year.



### IDAHO INDIVIDUAL NET OPERATING LOSS COMPUTATION

Nam	e e	y Nu	mber		
PA	RT I - Use this part to compute your net operating loss. Loss Year				
1.	Total Idaho adjusted income (loss) reported on the loss year return		1		
2.	Idaho net operating loss carryover				
3.	Capital losses in excess of capital gains				
4.	Idaho capital gain deduction				
5.	Add lines 2, 3 and 4.		5		
6.	Add lines 1 and 5.		6		
7.	Casualty losses reported on federal Schedule A, Itemized Deductions		7		
8.	Net operating loss deduction. Subtract line 7 from line 6.		8		
9.	Net operating loss carryback. Enter the amount from line 8 but not more than \$100,000. you elected to forego the carryback, enter -0- here and on line 10		9		
10.	Enter the amount from line 7b, column c, Part II. This is the net operating loss carryback not absorbed in the carryback years.	1	0		
11.	Net operating loss carryover. Line 8, less line 9, plus line 10. Enter this amount on line 1, column a, Part III.	1	1		

#### INSTRUCTIONS FOR PART I

Use Part I to compute your net operating loss. Enter the loss year on the line.

Line 1. Enter Idaho adjusted income (loss).

• Form 40 filers: line 29 - 1996, 1997, 1998, 1999

line 30 - 2000

• Form 43 filers:

line 46, Column B - 1996 line 44, Column B - 1997, 1998, 1999

line 45, Column B - 2000

Line 2. Enter any operating loss carryover from prior years if included in the amount on line 1.

Line 3. Enter any capital losses in excess of capital gains included in the amount on line 1. For example, a taxpayer reported a \$4,000 capital gain and a \$5,000 capital loss on federal Schedule D. \$1,000 is the amount of capital loss deduction included in Idaho adjusted income (loss).

Line 4. Enter any Idaho capital gain deduction allowed in computing Idaho adjusted income (loss).

**Line 5.** Add lines 2, 3 and 4 and enter the total on this line.

Line 6. Add lines 1 and 5. A loss on line 1 will be reduced by the amount on line 5. For example, a taxpayer's Idaho adjusted income (loss) is (\$10,000). The taxpayer claimed an Idaho capital gain deduction of \$1,500 (\$1,500 is entered on lines 4 and 5). The taxpayer enters (\$8,500) on line 6.

A loss on line 1 could be eliminated by an amount on line 5. For example, a taxpayer's Idaho adjusted income (loss) is (\$10,000). The taxpayer claimed an Idaho net operating loss carryover of

\$20,000 (\$20,000 is entered on lines 2 and 5). The taxpayer enters \$10,000 on line 6. When the total of lines 1 and 5 on line 6 is a positive amount, no net operating loss exists unless the casualty loss on line 7 creates the loss.

**Line 7.** Enter any casualty losses reported on federal Schedule A, Itemized Deductions, provided that the property is physically located in Idaho at the time of the casualty. Use federal Form 4684, Section A, to compute the casualty loss(es) deductible on Schedule A.

Form 43 filers will multiply the Idaho percentage from the loss year return by the amount of casualty loss reported on the federal Schedule A for that year to determine the amount to enter on this line. Enter the amount.

Line 8. Idaho net operating loss deduction. Subtract line 7 from line 6. A loss on line 6 will be increased by an amount on line 7. For example, a taxpayer's Idaho adjusted income (loss) is (\$10,000) and he also reports a \$1,500 casualty loss on Schedule A. His net operating loss deduction is (\$11,500). This is the net operating loss deduction that is available for carryback or carryover. Use Part II to determine carryback applications and Part III to determine carryover applications.

Line 9. This is the net operating loss to enter on line 1, Part II. If the loss was for tax years prior to January 1, 2000, enter this amount in column a. If the loss was for tax years on or after January 1, 2000, enter this amount in column b. Do not enter more than \$100,000. Complete Part II before entering any amounts on lines 10 and 11.

Line 10. If the net operating loss carryback is not completely absorbed, enter the unabsorbed amount.

Line 11. If you elect to forego the net operating loss carryback, enter the amount from line 8.

# APPLICATION OF IDAHO INDIVIDUAL NET OPERATING LOSSES

Na	ame			Social Security No	umber
P.	ART II - CARRYBACK Use this part to apply the net operating	loss to carryback year	(s). Loss \	ear	
	Complete one column before going to the next column.	a. 3rd preceding tax year ended	b. 2nd pre year ended		c. 1st preceding tax year ended
1	Net operating loss carryback. In column a, enter as a positiv number the net operating loss from Part I, line 9. In columns b and c, enter amounts from line 7 below, columns a and b respectively	e			
2	Idaho adjusted income from the tax return (or as previously adjusted) before NOL carryback. If a loss, enter the amount as a negative number				
3	. Net capital loss deduction claimed on the carryback year return. See federal Schedule D. Enter as a positive number.				
4	. Idaho capital gain deduction claimed on the carryback year return. Enter as a positive number. See Idaho Form CG				
5	. Casualty loss reported on Schedule A, Itemized Deductions, and claimed on the carryback year return. Enter as a positive number				
6	. Modified Idaho adjusted income. Add lines 2, 3, and 4 and subtract line 5. If the total on this line is zero or less, enter -0				
7	. Net operating loss available for application to another year:				
	a. If line 6 is equal to or more than line 1, your net operating loss has been absorbed. Enter zero here.				
	b. If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter the amounts from columns a and b on line 1 of the next column. Enter the amount from column c on line 10, Part I.	t.			
_					
P	ART III - CARRYOVER  Use this part to apply the net operating		-		
	Complete one column before going to the next column	a. 1st succeeding tax year ended		cceeding tax	c. 3rd succeeding tax year ended
1	. Net operating loss carryover. In column a, enter as a positive number the net operating loss from Part I, line 11. In columns b and c, enter amounts from line 7 below, columns a and b respectively	5			
2	. Idaho adjusted income from the tax return before the NOL carryover. If a loss, enter the amount as a negative number.				
3	. Net capital loss deduction claimed on the carryover year return. See federal Schedule D. Enter as a positive number.				
4	. Idaho capital gain deduction claimed on the carryover year return. Enter as a positive number. See Idaho Form CG				
5	. Casualty loss reported on Schedule A, Itemized Deductions, and claimed on the carryover year return. Enter as a positive number				
6	. Modified Idaho adjusted income. Add lines 2, 3, and 4 and subtract line 5. If the total on this line is zero or less, enter -0-				
7	. Net operating loss available to apply to another year:				
	a. If line 6 is equal to or more than line 1, your net operating loss has been absorbed. Enter zero here.				
	b. If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter this amount on line 1 of the next column and apply the loss to the next available year.				

## Instructions for Idaho Form 56

#### **GENERAL INFORMATION**

For tax years beginning on and after January 1, 2000, if you have a net operating loss, you may carry back up to \$100,000 of the net operating loss to the two tax years preceding the loss year. The loss is first applied to the second year preceding the loss year, then the first preceding year until the loss, limited to \$100,000, is absorbed. Any loss not absorbed in the carryback years and the loss in excess of \$100,000 will be a carryover up to 20 years following the loss year. The loss carryover is applied to each year in order until absorbed or until the 20-year carryover period has expired.

For tax years beginning prior to January 1, 2000, the net operating loss generally must be carried back to the three preceding years. The carryback is limited to a maximum of \$100,000. Any remaining loss may be carried forward until used, but no longer than 15 years.

You may elect to forego the two-year carryback provision and carry the loss over up to 20 years. The loss carryover is applied to each year in order until absorbed or until the 20-year carryover period has expired. You must elect to forego the carryback provision by the due date, including extensions, of the loss year return. The election is made by attaching a statement to the loss year return. The statement must clearly indicate that you elect to forego the carryback provision and include your name, address, social security number, and the amount of the loss. The statement must indicate that you make the election pursuant to Section 63-3022(c)(1), Idaho Code, to forego the carryback provision. You cannot revoke the election to forego the carryback provision for the loss year.

# APPLICATION OF INDIVIDUAL NET OPERATING LOSS TO A YEAR IN WHICH IDAHO ADJUSTED INCOME COMPLETELY ABSORBS THE LOSS

When Idaho adjusted income of the carryback or carryover year is sufficient to absorb the net operating loss, no special adjustments to such income are required.

If the net operating loss deduction is carried back and absorbed in the carryback year, you must file a **Form 40X**, Amended Idaho Individual Income Tax Return, for the absorption year. Idaho adjusted income will be decreased by the amount of the loss. Because your tax liability is reduced, you must recompute nonrefundable tax credits. Attach a copy of Form 56 to your amended return.

If you are carrying back the loss, you have until the 15th day of the 40th month following the end of the loss year to file the amended return for the absorption year.

If the net operating loss deduction is a carryover and absorbed in the first carryover year, subtract the loss on the tax return for the carryover year. Attach a copy of Part I to your income tax return.

# APPLICATION OF INDIVIDUAL NET OPERATING LOSS TO A YEAR IN WHICH IDAHO ADJUSTED INCOME DOES NOT COMPLETELY ABSORB THE LOSS

If, after taking previous carrybacks and carryovers into account, the net operating loss carryback or carryover exceeds Idaho adjusted income of the year to which the loss is carried, certain modifications must be made to such income to determine the amount of the loss that is absorbed. Parts II and III are provided to compute the amount of the net operating loss absorbed in each year to which the loss is applied when Idaho adjusted income does not completely absorb the loss. If your loss is not absorbed after three carryback and three carryover years, an additional copy of Part III will be necessary. The years to which a net operating loss is applied will be determined by whether a special election was made. Refer to the general information above.

Reporting the application of the net operating loss to a year in which income does not completely absorb the loss:

When a net operating loss has been applied to a tax year for which an income tax return has previously been filed, you must file a Form 40X, Amended Idaho Individual Income Tax Return, to report the application and request a refund. File a Form 40X for each year to

which the net operating loss has been applied. Because your income tax liability is zero, you will have to make an adjustment for any nonrefundable tax credits claimed on the original return. Attach a copy of Form 56 to your amended return.

When a net operating loss is applied to a carryover tax year for which the income tax return has not been filed, you must compute the Idaho net operating loss carryover to report on the return when it is filed. Compute the net operating loss that will be available for application to next year on Part III. Attach a copy of Form 56 to your income tax return when you file it.

Continue the application of the unabsorbed net operating loss to any carryback years available and, to the extent there is any net operating loss not absorbed in the carryback years, to carryover years' returns which have previously been filed.

Following these instructions, you will apply any remaining net operating loss when your next income tax return is filed.

#### INSTRUCTIONS FOR PART II

Line 1. In column a (or column b, if the loss is for tax years beginning on or after January 1, 2000), enter the net operating loss carryback from line 9, Part I, as a positive number. Your carryback is limited to \$100,000. You will use column b if there is an amount on line 7, column a or if the loss is for tax years beginning on or after January 1, 2000. Enter the amount from line 7, column a, as a positive number in column b of this line. You will use column c if there is an amount on line 7, column b. Enter the amount from line 7, column b, as a positive number on this line in column c.

**Line 2.** Enter the Idaho adjusted income of the third preceding tax year in column a if column a is used. If column b is used, enter the

Idaho adjusted income of the second preceding tax year. If column c is used, enter the Idaho adjusted income of the first preceding tax year. Do not include the net operating loss carryback deduction in this amount. If this amount is a loss, enter it as a negative amount.

**Line 3.** If a capital loss in excess of capital gains was claimed on the preceding tax year return(s), enter the capital loss deduction as a positive amount. See federal Schedule D for the preceding tax year(s).

**Line 4.** If an Idaho capital gain deduction was claimed on the preceding tax year return(s), enter the deduction as a positive number.

Line 5. Enter the casualty loss reported on federal Schedule A and deducted on the preceding tax year return(s) as a positive number. Do not make an entry here if you used the standard deduction on the Idaho return.

Form 43 filers will multiply the amount of casualty loss reported on the federal Schedule A by the Idaho percentage for that year to determine the amount to enter on this line. Enter the amount as a positive number.

Line 6. Add lines 2, 3 and 4 and subtract line 5. This is the ldaho adjusted income as modified for application of the net operating loss carryback. The modifications included in this amount reduce your net operating loss carryback but may not necessarily result in a refund. If this amount is zero or a nega-

tive amount, none of your net operating loss carryback will be used in this preceding tax year.

Line 7. If line 6 is equal to or more than line 1 in the same column, your net operating loss carryback has been absorbed. Enter zero on this line. When completing Form 40X, Amended Idaho Individual Income Tax Return, use the amount on line 1 (of Part II of this form) as the change amount on line 4, column B, Form 40X.

If line 6 is less than line 1, the net operating loss has not been absorbed. Subtract line 6 from line 1. This is the remaining net operating loss to apply to the next available year. Enter this amount on line 1 for the next preceding tax year or, if there are no more preceding tax years, enter this amount on line 10, Part I. If your income tax liability will be reduced by the application of the net operating loss carryback, file a Form 40X, amended return, to claim a refund. The amount to report as the change amount on line 4, column B, Form 40X is computed by subtracting line 7 from line 1.

#### **INSTRUCTIONS FOR PART III**

Line 1. In column a enter the net operating loss carryover from line 11, Part I. If you made the election to forego the three-year carryback provision, the amount on line 11 will be the same as the amount on line 8. Enter the net operating loss carryover as a positive number. You will use column b if there is an amount on line 7, column a. Enter the amount from line 7, column a, as a positive number in column b of this line. You will use column c if there is an amount on line 7, column b. Enter the amount from line 7, column b, as a positive number on this line in column c.

If your net operating loss carryover is not absorbed by the third succeeding tax year, you may use additional copies of Part III to show the application of the net operating loss carryover.

Maximum number of carryover years:

- 20 years losses incurred after 1999
- 15 years losses incurred after 1989 but before 2000
- 10 years losses incurred after 1982 but before 1990
- 5 years losses incurred before 1983

Line 2. Enter the Idaho adjusted income of the first succeeding tax year in column a if column a, is used. If column b is used, enter the Idaho adjusted income of the second succeeding tax year. If column c is used, enter the Idaho adjusted income of the third succeeding tax year. Do not include the net operating loss carryover deduction in this amount. If this amount is a loss, enter it as a negative amount.

**Line 3.** If a capital loss in excess of capital gains was claimed in arriving at Idaho adjusted income, enter the capital loss deduction as a positive amount. See federal Schedule D for the carryover year.

**Line 4.** If an Idaho capital gain deduction was claimed in arriving at Idaho adjusted income, enter the deduction as a positive amount. See Idaho Form CG for the carryover year.

**Line 5.** Enter as a positive number the casualty loss reported on federal Schedule A and deductible on this carryover year return. Do not make an entry here if you use the standard deduction on the Idaho return.

Form 43 filers will multiply the amount of casualty loss reported on the federal Schedule A on the carryover year return by the Idaho percentage for that year to determine the amount to enter on this line. Enter the amount as a positive number.

**Line 6.** Add lines 2, 3 and 4 and subtract line 5. This is the Idaho adjusted income as modified for application of the net operating loss carryover. The modifications included in this amount reduce your net operating loss carryover. If this amount is zero or a negative amount, none of your net operating loss carryover will be used in this succeeding tax year.

Line 7. If line 6 is equal to or more than line 1 in the same column, your net operating loss carryover has been absorbed. Enter zero on this line. When completing your Idaho income tax return for the carryover year, enter the amount on line 1 (of Part III of this form) on the subtraction line for the Idaho net operating loss carryforward.

If line 6 is less than line 1, the net operating loss has not been absorbed. Subtract line 6 from line 1. This is the remaining net operating loss to apply to the next available year. Enter this amount on line 1 of the next column. When completing your ldaho income tax return for the carryover year, compute the amount to enter on the subtraction line for the ldaho net operating loss carryforward by subtracting line 7 from line 1.

#### F 75 O 75 R TC7500-1

# IDAHO FUELS USE REPORT

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#### Instructions for Idaho Form 75

#### WHO MAY FILE

 Any person or entity that has purchased 50 gallons or more of taxpaid fuel and used the fuel for a nontaxable purpose.

Form 75 may be filed only by the final user of the fuel.

- Any refund or tax due to a partnership or corporation must be claimed by the business. It may not be applied to the individual returns filed by partners or shareholders.
- Any refund or tax due to a sole proprietorship must be claimed by the individual.

You may claim a refund or report fuels tax due in one of the following ways:

- Monthly
- Quarterly
- Annually
- · Alternate period (any period greater than one month)
- If you file the claim with your Idaho income tax return, report the
  amount of the tax due or refund amount on the proper line of the
  return and attach the Form 75 to the return. NOTE: Do not claim a
  refund for tax-paid fuel on your Idaho income tax return if you have
  claimed a refund for the same tax-paid fuel on a separate Form 75
  filed during the year.

You may claim a refund of Idaho fuels tax if:

- You buy fuel with Idaho fuels tax included, but use the fuel in a nontaxable manner. This includes using the fuel: in unlicensed equipment; to operate a stationary engine; in a refrigeration unit or other auxiliary equipment that has a supply tank separate from the main supply tank of the motor vehicle; or for home heating. You may not claim a refund for fuel used in recreational vehicles or noncommercial motor boats.
- You file reports under the International Fuel Tax Agreement (IFTA) or operate an intrastate motor vehicle and use fuel from the main supply tank of a licensed motor vehicle to operate power take-off equipment (special fuels only) or auxiliary engines (special fuels and gasoline). IFTA carriers must submit a copy of their IFTA report and copies of their original fuel invoices. Intrastate motor vehicle operators must complete and attach the Idaho Fuels Tax Refund Worksheet, Form 75-IMV. The allowances are listed in the Idaho Fuels Tax Administrative Rules. For more information, visit our Web site at www2.state.id.us/tax/ifta.htm.
- You operate an intrastate motor vehicle and use special fuels on nontaxable roads. You must complete and attach the Idaho Fuels Tax Refund Worksheet, Form 75-IMV.

- You use special fuels in a motor vehicle owned or leased, and operated by an instrumentality of the federal government or state of Idaho, including its political subdivisions (local government).
- You buy gasoline or special fuels with Idaho fuels tax included and use the fuel in aircraft. You may only claim a refund of the difference between the Idaho motor fuels tax rate and the aviation gasoline or jet fuel tax rate. Refer to specific instructions for an Aircraft Fuels Tax Refund.

You owe Idaho fuels tax if you purchased gasoline, special fuels, or aircraft fuel and did not pay the Idaho fuels tax and used the fuel in a taxable manner. The fuel is used in a taxable manner if it is used in licensed motor vehicles or aircraft.

The fuel may be subject to Idaho sales or use tax if it is exempt from the Idaho fuels tax. If any sales or use tax is due, it should be reported on either your Idaho income tax return, Idaho sales and use tax return, or Idaho use tax return, Form 850-U. Form 850-U is available on our Web site at www2.state.id.us/tax/ifta.htm.

#### AIRCRAFT FUELS TAX REFUND

If you have paid the aviation gasoline tax or the jet fuel tax, no additional tax or refund is due.

- **Gasoline**. If you buy gasoline (regular, regular unleaded, or premium) and pay Idaho gasoline tax, then use the gasoline in aircraft, you are entitled to a refund of the difference between the gasoline tax rate and the aviation gasoline tax rate.
- **Diesel**. If you buy diesel and pay the Idaho diesel tax, then use the tax paid diesel in an aircraft, you are entitled to a refund of the difference between the diesel tax rate and the jet fuel tax rate.
- Complete Section III REFUND to compute the refund amount for the gasoline and/or diesel tax and Section IV TAX DUE to compute the aviation gasoline and/or jet fuel tax due. Enter the net difference on line 12 or 13, whichever applies.

#### AIRCRAFT FUELS TAX DUE

Complete Section IV TAX DUE of this form to compute the aircraft fuels tax due. If Idaho fuels tax has not been paid on the diesel, gasoline or other fuels used in your aircraft, you must report the tax due at the jet fuel or aviation gasoline tax rate.

# Specific Instructions for lines not fully explained on the form

Enter name, d.b.a. (the name under which you are doing business), address, and social security number (SSN) or federal employer identification number (EIN).

If you are reporting as an individual or sole proprietor rather than an S corporation, corporation, partnership, estate, or trust, you must use your SSN. **DO NOT USE YOUR EIN.** 

#### **FILING PERIOD**

Complete Section I. Enter the appropriate beginning and ending date for the filing period. SECTION I MUST BE COMPLETED TO CLAIM A FUELS TAX REFUND.

#### **DESCRIBE NONTAXABLE USE**

Complete Section II. Mark the box(es) that describe(s) the nontaxable use(s) of the fuel. For unlicensed equipment list the type of equipment in the space below the boxes. If you have a nontaxable use of fuel that is not described by any of the listed nontaxable categories, mark the "Other" box and describe your nontaxable use. Attach additional pages if necessary. THIS INFORMATION MUST BE PROVIDED TO RECEIVE A FUELS TAX REFUND.

#### REFUND/TAX DUE COMPUTATIONS

#### Section III. REFUND

**Line 1.** Enter the number of gallons of fuel *(rounded to the nearest whole gallon)* used in a nontaxable manner during the filing period in the appropriate column by fuel type.

Line 3. Multiply line 1 by line 2 for each fuel type.

#### Section IV. TAX DUE

**Line 6.** Enter the number of gallons of fuel (*rounded to the nearest whole gallon*) used in a taxable manner during the filing period in the appropriate column by fuel type.

Line 8. Multiply line 6 by line 7 for each fuel type.

**Line 9.** Enter the amount of transfer fee as calculated on Form 75-QC. Enter negative amounts in brackets. Attach a copy of the Form 75-QC worksheet to the completed Form 75.

#### TAX DUE OR REFUND

If filing Form 75 with your Idaho income tax return, complete lines 1 through 11 and enter amounts from the following lines on your tax return.

- Line 4 on the gasoline tax refund line
- Line 5 on the special fuels tax refund line
- The total of lines 9, 10, and 11 on the special fuels tax due line

If filing Form 75 separately from your Idaho income tax return, complete lines 1 through 13.

#### Signature

You must sign the Form 75 if filed separately from your income tax return. FAILURE TO SIGN THIS FORM WILL DELAY YOUR REFUND.



# **IDAHO FUELS TAX REFUND WORKSHEET**

## INTRASTATE MOTOR VEHICLES

			laas / =	
Name	e / DBA		SSN / EIN	
ref	u may use this worksheet to calculate your und of the special fuels tax if you use ecial fuels in:	FUEL TAX TY  DIESEL PROPANE	PE (check	one):
	<ol> <li>Motor vehicles on nontaxable roads</li> <li>A motor vehicle's power-take-off unit</li> </ol>	☐ NATURAL (	GAS	
		CALCULAT	ED MPG	STANDARD OR STATUTORY MPG
1.	Total miles			
2.	Total Fuel Consumed			
3.	Less: Fuel Used In Off-loading Allowance (see below )			
4.	Net Gallons Consumed			
5.	Calculated, Standard or Statutory MPG			
6.	Total Taxable Miles			
7.	Total Gallons of Fuel Used on Taxable Roads			
8.	Tax Paid Gallons			
9.	Nontaxable Gallons			
	INTRASTATE MOTOR VEHICLE OFF-LOA	ADING ALLO	WANCE	CALCULATION
1. 2. 3.	Number of units* used in off-loading process Credit allowed per unit (See Idaho Motor Fuels Gallons used in off-loading process (Multiply lir (Carry to line 3 of Idaho Fuels Tax Refund Work	ne 1 by line 2)		 
	OR			
2.	Number of gallons placed into the fuel supply to (from line 2 of the Idaho Fuels Tax Refund Work Tax Commission approved off-loading percentage Gallons used in off-loading process (Multiply line (Carry to line 3 of Idaho Fuels Tax Refund Work Idaho Fuels	ksheet) ge ne 1 by line 2)		

<sup>\*</sup>Units may include hours, gallons, tons, or yards as specified in the Idaho Motor Fuels Tax Rules for each allowance. Use separate worksheet for each process that has a different unit of measure.

### General Instructions for Idaho Form 75-IMV

#### WHO MAY FILE

This form may be used by a person or entity who operates intrastate motor vehicles of any gross vehicle weight and/or interstate motor vehicles which have gross vehicle weights of 26,000 pounds or less that are not required to be licensed under the International Fuel Tax Agreement (IFTA) and use Idaho tax-paid special fuels (undyed diesel, propane, or natural gas) from the main supply tank of the motor vehicle for nontaxable uses. Nontaxable uses of Idaho tax-paid special fuels drawn from a motor vehicle's main supply tank include operating the motor vehicle's power-take-off (PTO) equipment and/or operating the motor vehicle on nontaxable roads.

To compute your nontaxable gallons you can use one of two methods:

A **Calculated MPG** is used if the consumer does not qualify to use a standard or statutory MPG or the consumer's calculated MPG is greater than the standard or statutory MPG. The following records must be maintained to support your calculated mpg:

- Total miles;
- Tax-paid fuel purchases;
- 3) Taxable miles;
- 4) Gallons used by power-take-off unit.

OR

A **Standard MPG** may be used by carriers in specific industries Refer to the table that follows.

STANDARD ON-ROAD MPG FOR:					
Logging	4.3 MPG				
Agriculture	4.5 MPG				
Sand, Gravel, and Rock Hauling	4.0 MPG				
Construction	4.4 MPG				

The records required when using a standard mpg are:

- Taxable road miles;
- 2) Tax-paid fuel purchases.

OR

A **Statutory MPG** may be used in the event that the special fuels consumer fails to keep sufficiently detailed records to determine a calculated MPG. The following MPGs for each vehicle weight may be used.

VEHICLES GROSS REGISTERED WEIGHT	STATUTORY MILES PER GALLON
over 40,000 lbs	4.00 MPG
26,001-40,000	5.50 MPG
12,001-26,000	7.00 MPG
6,001-12,000 lbs.	10.00 MPG
6,000 lbs. or less	16.00 MPG

Whichever method is used, complete the calculation using the corresponding column on this worksheet.

NONTAXABLE MILES DEFINITION: In general, miles driven on public roads which are constructed with concrete, asphalt, gravel, composition, dirt, or other surfaces are taxable miles for fuels tax purposes. However, miles driven on roads which are not open to the public, not maintained by a governmental entity, located on private property and maintained by the property owner, located on a construction site or defined in Idaho Motor Fuels Tax Administrative Rule 290.02.b. are considered nontaxable miles and the person operating the motor vehicle on these roads may be eligible for a special fuels tax refund.

# Specific Instructions for lines not fully explained on the form

#### **CALCULATED MPG**

Line 1. Enter total miles driven everywhere by motor vehicles which have nontaxable uses of fuel.

Line 2. Enter the number of gallons consumed. Fuel is consumed when it is placed into the fuel supply tank of the motor vehicle.

Line 3. Enter the number of gallons used by off-loading (power-take-off) equipment from the Non-IFTA Off-loading Allowance Calculation.

Line 4. Subtract line 3 from line 2.

Line 5. Divide line 1 by line 4. (Round to two decimal places.)

Line 6. Enter the number of miles subject to fuels tax.

Line 7. Divide line 6 by line 5. (Round to nearest whole gallon.)

Line 8. Enter the number of gallons of Idaho taxpaid fuel placed in the supply tank(s) of the motor vehicle(s). (Round to nearest whole gallon.)

Line 9. Subtract line 7 from line 8. Carry the result to Section III, line 1 of Form 75 under the appropriate fuel type.

#### STANDARD OR STATUTORY MPG

Line 5. Enter the "standard on-road mpg" for your industry or statutory MPG for your weight class from the appropriate box above.

Lines 6 - 9. Follow the instructions for the "calculated mpg".

# IDAHO INDIVIDUAL INCOME TAX PAYMENT VOUCHER FOR ELECTRONIC FILERS

F ID-40V R TC40V01 M 6-08-00	Amount Paid \$
	For office use only ame Control E.C. R.C.
	L.C. K.C.
Your first name Spouse's first name Last name	
Address	
City, State and Zip Code	
only, state and zip sode	
Mail check or money order payable to:	
Idaho State Tax Commission, PO Box 83784, Boise, ID 83707-3784	
IDALIO INIDIVIDUAL INICOME TAV	
IDAHO INDIVIDUAL INCOME TAX PAYMENT VOUCHER FOR ELECTRONIC FILERS	
F ID-40V	Amount Paid
ТС40V01 м 6-08-00	\$
	For office use only
Your Social Security Number Spouse's Social Security Number Na	ame Control E.C. R.C.
Your first name Spouse's first name Last name	
Address	
City, State and Zip Code	
Mail check or money order payable to:	
Idaho State Tax Commission, PO Box 83784, Boise, ID 83707-3784	
IDAHO INDIVIDUAL INCOME TAX	
PAYMENT VOUCHER FOR ELECTRONIC FILERS D-40V	Amount Paid
O 1.0 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	\$
	For office use only
Your Social Security Number Spouse's Social Security Number Na	ame Control E.C. R.C.
Your first name Spouse's first name Last name	
Address	
Address	
City, State and Zip Code	

Mail check or money order payable to: Idaho State Tax Commission, PO Box 83784, Boise, ID 83707-3784

### TC40V01-2

### Instructions for Form ID-40V

Use only for electronically filed income tax returns.

In the Amount Paid box, enter the amount of payment (check or money order). Enter the taxpayer's name, address, and social security number in the spaces provided. If a joint return is filed, enter the names and social security numbers of both taxpayers.

The total amount of tax due must be paid in full. If payment is not postmarked on or before April 16, 2001, the tax due is subject to penalty and interest. Mail to:

Idaho State Tax Commission Electronic Filing Processing PO Box 83784 Boise, Idaho 83707-3784

TC40V01-2 6-08-00

### Instructions for Form ID-40V

Use only for electronically filed income tax returns.

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The total amount of tax due must be paid in full. If payment is not postmarked on or before April 16, 2001, the tax due is subject to penalty and interest. Mail to:

Idaho State Tax Commission Electronic Filing Processing PO Box 83784 Boise, Idaho 83707-3784

TC40V01-2

## Instructions for Form ID-40V

Use only for electronically filed income tax returns.

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The total amount of tax due must be paid in full. If payment is not postmarked on or before April 16, 2001, the tax due is subject to penalty and interest. Mail to:

Idaho State Tax Commission Electronic Filing Processing PO Box 83784 Boise, Idaho 83707-3784

# FOR NEW APPLICANTS ONLY

Idaho State Tax Commission	Date
Attn: Diane Tietz	
PO Box 36	
Boise Id 83722	
RE: Intent to Participate in the Fede	ral/State Electronic Filing Program
Dear Ms Tietz:	
I am interested in participating in th	e Federal/State Filing Program for the
State of Idaho. The following inj	formation is provided concerning my
interest.	
Name:	
Business Name or DBA:	
Phone Number:	
Software Name:	
Transmitter Name (third party):	
I am currently an accepted ele Service.	ctronic filer with the Internal Revenue
My EFIN is (A cop	by of my acceptance letter is attached.)
Service's Electronic Filing Program not have an EFIN/ETIN at this time.	o participate in the Internal Revenue a. I have not been accepted and /or do I will provide this, as well as a copy of ive it. (A copy of my application is
Sincerely,	



# Secure State Ack Server

235 East Palmer Street Franklin NC 28734

(828)349-5750 Fax (828)349-5745 email sysadmin@state-ack.net

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Modem Type		
Async Moden (Check Or	10)	
⊒ 1200	⊒2400	⊒ 4800
⊒9600	□ 14.4	⊃28.8
⊒ 33.6	☐ Dedicat	ed Line
TCP/IP TRANS		
Modem Type		
Baud Rate: (Check O	ne)	
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□ 9600	□ 14.4	□ 28.8
□ 33.6	⊃ 56K	
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SIGNATURE:		